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Use of Unrestricted Bequests  
Administrative Auspices of  
Residential Treatment  
*Symposium:* The Executive  
Has a Few Problems, Too  
The Social Worker and the Court  
The Court's Authority  
A Day Care Travelogue  
What Can We Do  
for Migrant Children?  
The Needs of Adolescents  
in Foster Care

*March 1958*

# CHILD WELFARE

JOURNAL OF THE  
CHILD WELFARE LEAGUE OF AMERICA, Inc.

HENRIETTA L. GORDON, Editor

CHILD WELFARE is a forum for discussion in print of child welfare problems and the programs and skills needed to solve them. Endorsement does not necessarily go with the printing of opinions expressed over a signature.

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# USE OF UNRESTRICTED REQUESTS\*

**Louis E. Weitz**

**Vice-President**

**Jewish Children's Bureau and Bellefaire  
Cleveland, Ohio**

*Endowment funds properly used are valuable to supplement other funds; improper use is contrary to all social welfare tenets and should be avoided.*

PERHAPS, no fiscal item has engendered greater emotional reaction than the use of unrestricted funds or endowment funds. The timeworn cliché referring to wives is almost applicable to this area: you can't live with them and you can't live without them.

There is no question, in this writer's mind, of the desirability of endowment funds, which are to the institution what savings are to the individual. However, the needs for such funds and the projected minimum to be sought vary, depending on the type of operation of the agency, the nature of its support, and the apparent future needs for the service in the community. An agency whose prime function is service, which can operate as an "office-type" agency, will not face so great a need as the agency operating an extensive plant. Again, the agency that is community supported, in part or in full, faces fewer financial problems and risks than does one that must rely on its own fund-raising program. There can be no pat answers to any of these problems. My own experience has been with a multiple-service child care agency which includes a residential treatment center, and my thinking and conclusions are naturally influenced accordingly.

Unrestricted or endowment funds serve three basic purposes:

- (1) to provide funds to meet emergent or unanticipated needs;
- (2) to provide for experimentation and demonstration outside of the operating budget; and
- (3) to produce additional income.

Except in most unusual instances, such funds should not be used for operating purposes—otherwise their real value will be lost, not only to the agency but also to the community, and might discourage potential

donors from giving. Each agency should make every effort to provide itself with accumulated endowment funds. To my mind failure to recognize this as an agency responsibility is not only a complete lack of foresight but also a tacit admission, by those responsible for the agency, of their failure to see and believe in future needs of the community for the services being rendered and their failure to assume leadership roles in community planning. Only the self-perpetuation of unneeded "services" to enhance the prestige of a selfish few ranks as a greater disservice than the failure to provide for perpetuation of needed community services.

There is no yardstick by which to measure the practical minimum to be sought by way of unrestricted funds. Many factors should be considered. An agency flexible in its program and responsive to changing community needs should plan for endowments which approximate twice their annual operating budget. Where the operating budget does not provide for depreciation of capital improvements or provide a reserve therefor, such an item should be added to the operating budget before determining the desired amount of accumulated endowment funds. If there is such a thing as a desired maximum, no agency or agency executive would be so foolish as to admit it publicly; for all practical purposes, *this* is no problem.

## **Purpose of Such Funds**

In examining more closely the basic purposes of such funds, that dealing with production of income needs no great explanation. A wise investment program serves a dual purpose: additional operating funds for the agency and the resultant release of community funds for use in other areas. The additional operating funds also make possi-

\* This paper is serving as the basis of a Symposium. Discussion will follow in the April and May issues.

ble an enrichment of the existing agency program. With the great demand and need for additional funds, any method of producing such income will be for the betterment of the community and the fulfillment of its basic needs.

Any agency fulfills but half of its *raison d'être* if it merely renders those services for which it came into being and for which it exists. There is nothing static in social work, any more than life itself can be static. Unless foundation funds are available for experimental and demonstrative purposes, endowment funds represent the sole source which allows for a program to determine possible new and better methods of giving service. Only a progressive agency deserves to perpetuate itself—and only such agencies can attract the better social worker, for whom today is only the excuse for planning for tomorrow.

There are other areas where such funds are of utmost necessity. First, they offer the opportunity to evaluate the services being rendered by the agency and, at the same time, to evaluate the need for such services. Planned periodic self-studies—with the help of fact-finding, impartial experts—are signposts to the agency, indicating the proper road to future needs. I recall the agency with a seventy-five-year history in custodial care for children that found this did not represent the real need that it could fulfill; that it should go down the road labeled "residential treatment for emotionally disturbed children." The happy and fortuitous combination of a staff and board which put a premium on progress allowed this new road to be taken—but without funds to provide for this study and the funds necessary to supplement operating funds during the long period of change, the community would have lost what today is a greatly needed service. In this instance, the supplementing of operating funds was vital to the institution's existence until the public could be educated to the need for this new and expensive service and its cost.

This same agency provides us with two other examples of the value of such funds which allowed it to demonstrate to the com-

munity the need for new services within its existing framework. In the first instance, the staff of the institution noted that many children were being refused admission because they were too disturbed to attend a public school; when several children, already in the institution, could not continue in public school and no other institution could be found to serve them, a teacher was hired to prepare them for re-entry to public school. Today, the school on the campus represents a need for about eighty per cent of those entering for treatment and is an integral part of the treatment program. A similar tale can be told about the establishment of "group" foster homes by the foster home department of the agency—homes for three to five adolescents who cannot yet adjust to individual foster homes and for whom institutional placement either is not advisable or has reached its limit of effectiveness. At the present time, three such homes are included within the operating budget of the agency, with others contemplated.

Whether the need creates the service or vice versa is in the "hen and egg" category. But one thing is certain: without such funds no service will be created and the need will either be unrecognized or unmet.

The remaining basic purpose for such funds is to meet emergencies. This phase of use can be broken down into three classes:

- (1) use for major capital repairs or replacements;
- (2) supplementation of operating funds in the event of community failure to provide necessary funds; and
- (3) to meet unanticipated demand for service where past experience could not have been relied upon as a determinant.

### **Cooperation in Community Planning**

Thus far I have made my argument for the desirability of endowment funds. The uses of such funds, although greatly important, must carry with them a *caveat*, which if ignored could be productive of harm far greater than any good that could be produced. Those who most strongly oppose the merit of endowment funds do so out of an apprehension that the availability of such funds will render the agency less amenable to com-



munity planning than it should be. Community planning, which is the accumulated thinking of those knowing the needs of the community, is the only logical method of providing at least adequate coverage of these needs. Without such planning there are bound to be many segments of the population whose problems are ignored. Just as chaos is the result of leaderless, thoughtless actions of individuals, a not dissimilar situation would arise if individual agencies were to flaunt community needs in favor of their own brand of self-satisfaction.

Just as each citizen must allow himself to be governed in the interests of the many—even should it deprive him of what *he* considers should be part of his rights as a free man—so must each agency give up certain rights of self-action in order to provide for the greater good of all the people they serve. The so-called autonomous rights of agencies cannot exist without necessary safeguards, else we become an anarchistic society, dedicated to the desires of the few at the cost of the suffering of the many. Daniel Webster stated the general proposition in these words: "Liberty exists in proportion to wholesome restraints." The word "autonomy" means self-government and government itself implies the restriction of individuals in favor of the greater good for the greater number. As long as any agency is reliant upon the public weal it should likewise be responsible to public need. Autonomy should be considered a privilege, not an excuse; and any breach of good community planning in the name of autonomy should justifiably result in such discipline as would prevent similar occurrences taking place in the future.

This writer cannot conceive of any agency whose staff is dedicated to the principles of social welfare and whose trustees are imbued with the spirit of providing communal needs that could, in good conscience, oppose good community planning.

In this light, any extensions of service, change of service or new service should be entered upon only after receiving the approval of the group responsible for planning.

Even if such variance results from an emergency, it should be communicated to the planning group. The community as a whole must determine what is needed, the extent of the need and its priority as compared with other community needs. This is true if for no other reason than that change means greater cost and it is the community which ultimately must provide the wherewithal to effectuate such changes. Within this framework, an agency should be free to determine its program and how best to use its endowment funds. As long as there is a need for the agency's services, it should be allowed to define its program, knowing that at such time as this program fails to meet the needs or its standards for service are unsatisfactory, it must realign itself to the new demands or admit that there no longer exists a reason for its perpetuation.

Unfortunately, no agency and no community can meet the needs as fully and completely as they desire. We are limited not only by the inability to obtain as much money as is needed but also by the time necessary to achieve public acceptance for any desired changes. It would therefore be the height of impracticability to attempt to attain the ultimate today if there is no assurance that there will be a continuing program available for the future. There must be self-restraint to insure that funds will not be so expended as to jeopardize a continuing program, regardless of how great the need might seem for such expense. In the end, it would prove too highly uneconomical. No one ever killed an elephant with a shotgun.

### ***Endowment Funds and Annual Campaigns***

Those who are not favorably disposed to the principle of agency endowment funds often express the fear that such programs menace the annual campaigns which seek to raise funds for operating purposes. Experience will show this to be fallacious reasoning and that such programs, intelligently planned, react favorably upon such annual campaigns. An endowment fund "campaign" is one that should be considered on a long

term basis and with a "low pressure" type of solicitation as opposed to the short term, high pressure aspect of an annual campaign. It should not be surprising to learn that those who give to an endowment fund campaign are more favorably disposed towards the annual campaigns, probably because such donors have an increased interest and understanding and because they desire to see a continuation of programs in which they have already invested and with which they identify themselves. I have no doubt but that as endowment funds grow, annual chest campaigns will also be able to provide increasingly larger funds.

The agency with endowment funds will and should be strong—capable of cooperating on equal terms with the usually strong central financing agency. This represents the proper balance necessary to insure community growth. Dominance by either the financing group or an agency not only puts one group at a disadvantage but probably will result in the subservient group losing ambition and drive and being unable to fulfill those responsibilities which should be part of the program of a progressive agency.

It is not anticipated that there will be many agencies whose endowment funds will reach such great proportions as to make the agency completely self-sufficient. Nevertheless, one should guard against the possibility of complacency that often accompanies affluence—"whose plenty made him pore." The best safeguards lie in the constant awareness of "why" these funds were sought and the realization of the community needs which are still unmet.

By way of summary, the relation of an agency to the community is one that allows freedom of action until it impinges on the public good. That which is not productive for the entire community properly should be subordinated to needs objectively determined. In the final analysis, the dollars for social welfare are publicly contributed and the public should have the right to determine how to allocate them. Just as some drugs are life saving when properly taken, and deadly if unreasonably used, endowment funds used without sensible restraints could have fatal effects. Such funds are invaluable as a servant; never allow them to become the master.

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# ADMINISTRATIVE AUSPICES OF RESIDENTIAL TREATMENT\*

**Joseph H. Reid**

**Executive Director  
Child Welfare League of America, Inc.**

*Because the residential treatment center is such an important therapeutic tool for certain children, the question of its administrative auspices is vital.*

COMMUNITIES concerned with organizing a treatment center soon come to the question, "What kind of service do we need and who should operate it?" There are various answers, often in direct conflict with one another. Frequently, although they believe they are referring to the same thing, the proponents of these different answers have different purposes in mind when using the term "residential treatment center." The confusion may arise from the fact that "residential treatment" is a vague term to describe many types of programs. These differing answers are reflected in the history of residential treatment itself.

Residential treatment centers were organized under the auspices of several disciplines. Most of them were originated by practitioners of psychiatry and social work, a few by educators. They developed from dependency institutions, child guidance clinics, neuro-psychiatric hospitals, and even a school for the feeble-minded. The development of each was related only in a slight degree to the others. In fact, it was some years before their common purpose was recognized. Though the first residential or in-patient facilities for the exclusive treatment of disturbed children were organized in the mid-1930's, it was not until the 1940's that interdisciplinary conferences, such as Orthopsychiatry, included a formal discussion of them. From these discussions and the increasing literature on the subject it soon became apparent that although the various centers had quite different origins, they had much in common.

Those programs developed in the social work field, which had primarily begun as dependency institutions, were organized be-

cause it was recognized that many children had such severe behavior problems that they could not be treated in foster homes or in ordinary institutions. These were generally dependent children who, in addition to their psychiatric needs, required foster care. Recognition that ordinary mental hospital methods were not helping children accounted for the early development of special children's psychiatric hospitals. Child guidance clinics were also faced with serving a group of children with whom normal methods were not successful.

First, study and diagnostic resident facilities were developed for difficult cases that could not be observed thoroughly on an out-patient basis. Since observation, diagnosis and treatment go hand in hand, purely "study" and "diagnostic" facilities inevitably gave way to treatment centers. Child guidance clinics, of course, dealt primarily with children who lived in their own homes, as distinguished from foster children. Despite their diversity, several centers recognized similarity in the published descriptions of other programs, and although the exact origins of the term are not clear, "residential treatment center" was soon applied to a small, varied group of inpatient or resident facilities which concentrated exclusively on trying to help children who could not be treated in any other way.

In the last ten years there has been rapid development of organizations calling themselves residential treatment centers. The term as now used is not precise and covers a wide range of programs—in terms of intensity of treatment, type of children served, and auspices.

## ***Changes in Use of Centers***

In social work, the use of children's institutions has changed radically, because of the

\*From a paper given at the New Jersey Neuro-Psychiatric Institute, Princeton, New Jersey, September 21, 1955.

change in type of children referred to them in the past twenty years. The orphan has disappeared from our society due to a greatly decreased maternal death rate and the general improvement in health standards. Hundreds of thousands of children who might formerly have been cared for in institutions now live in their own homes, through help from improved public welfare programs, such as Aid to Dependent Children and OASI. The tremendous increase in the use of foster homes since 1935 has further reduced the number of so-called normal children in institutional populations. Finally, the development of child guidance clinics, family agencies, protective services, and other child welfare programs specifically directed toward treating the child in his own home, has caused changes in the character of the child being referred to institutions.

Today, all types of institutions throughout the United States, from the most sophisticated to the least developed, report a steady growth in the percentage of children admitted with behavior problems of such intensity that normal custodial care is of no use. Following the example of residential treatment centers, a great number of these institutions have been steadily adding clinical resources to their programs.

The use of psychiatric consultants, better trained social work staff, and psychologists mark the beginnings of such programs. Greater concern with the training of house-parents and their integration into a "team" approach further accelerates the institution's ability to work with disturbed children. Since many of the children they treat are excluded from normal public schools, many institutions have reversed the trend of the last thirty years. Instead of sending all children to public schools, they have developed specialized educational programs within the institutions. Throughout the country large custodial institutions are being gradually eliminated and small, specialized ones are developing, most of them adopting the characteristics, or at least the term, of treatment-oriented. Many of them, quite improperly term themselves residential treatment centers.

However, a growing number of institutions, operated under social work auspices, have developed highly specialized programs and have equipped themselves to work successfully with children who cannot be cared for in any other way.

Quite a few child guidance clinics have developed resident facilities for children who cannot be treated on an outpatient basis. Although some of them have not fully appreciated the essential dynamics of a treatment center—the integration of the entire staff and a total approach to therapy—many have successfully used treatment methods for children heretofore thought untreatable. An increasing number of hospitals are rapidly organizing their children's wards, following the examples set in Michigan, Rhode Island and California. Many have adopted the title "residential treatment program" for these wards. Again not a few hospitals have taken on the façade of a residential treatment program without understanding its essential dynamics.

In other fields, too, we see the increased use of the term "residential treatment center." Many private schools, aware that they are filled with disturbed children who have been sent there not for educational advantages but for "dumping" by rejecting parents, use a descriptive tag like "residential treatment center." They, too, have added a psychiatrist, a social worker, and a psychologist, and their catalogues stress their therapeutic program for disturbed children in residence.

Many people are disquieted by these developments, feeling grave danger in the fact that so many people tack on a façade of "treatment" without either understanding or caring about what is involved in the development of a sound program.

The director of one experimental research institution has recently deplored the rapid development of the many small institutions calling themselves treatment centers or some other title which implies that they provide therapy for disturbed children. He has stated that there is need for only a very few residential treatment centers, and a serious mistake

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has been made in the development of so many of these institutions. In my view, such an opinion is extremely shortsighted, for although the term is being misused, the development does represent tremendous progress in our thinking about children.

### ***Aims of Residential Treatment***

As institutions and communities have recognized that good food, shelter and clothing do not alone meet children's needs, that institutions are not a way of life for children but a means to an end, they began to be aware of what was missing from their programs—help to the child and his family so that he can be restored to normal community living. They then saw themselves as treating a child rather than simply caring for him. In doing so, they recognize first, that the institution is a specialized resource for children with special needs, and second, that special skills and resources are required to meet these needs. This realization is all to the good and needs to be strongly encouraged. The tag that persons attach to their program, in a desire to mark themselves as having gone beyond the custodial concept—whether they be children's dependency institutions or state hospitals—is of little importance. The important thing is that progress is being made.

Of the 270,000 children in the United States being cared for outside their own homes, a sizable percentage have behavior or personality problems so severe that they cannot be cared for in foster homes, nor placed for adoption. They require special care. In the nation's training schools are thousands of children who will not benefit by simple reeducation. They require a quite different approach if they are to be restored to anything resembling normal living. The child guidance clinic and the individual psychiatric practitioner are increasingly aware of the group of children who do not respond to therapy while living in their own homes. As social agencies become more skilled in the use of foster homes and develop better trained staff, fewer children will have to be referred to institutions. As child guidance

techniques are improved and their services become more widely available, they too will improve their ability to work with children in their own homes.

Despite the too frequent use of the term "residential treatment center," and its misuse by many different organizations and disciplines, there has been a slow but steady development of high standard, well conceived and well supported programs.

In discussing the auspices of residential treatment programs, I refer to those institutions for children who cannot be successfully treated on an outpatient basis. Who should administer them? Under what discipline should they be developed? What should be their focus? There is no one answer. We still know too little about comparative results of various methods. We do know that thousands of children go unserved, that the several disciplines involved make quite different contributions to the development of residential treatment centers, and that the acute shortage of trained personnel in the several disciplines must affect all our thinking and planning.

A discussion of two disciplines—psychiatry and social work—is pertinent because it is my belief that, in the future, residential treatment centers will primarily develop under the auspices of these two professions. Service programs have been developed primarily in the social work field and in much smaller numbers under the aegis of child guidance clinics, whereas research and training programs are to be found almost wholly within the medical field, and not infrequently under the auspice of a hospital or a similar medical center. However, the first determinant of the auspice of any program in any community depends on its purpose, namely whether it will be essentially a service, a research, or a training program. By service programs, I mean those directed toward helping children whose prognosis is reasonably good, which will use present knowledge to serve a maximum number of children. By research programs, I refer to those which have been set up specifically to increase knowledge, without regard to prognosis or



volume. And by training programs, I speak of those programs which have been established primarily to afford training opportunities to students, fellows, residents, and interns, which must of necessity sacrifice a degree of efficiency by so doing. True, any service program worthy of the name should contain a component of research and training, and any training and research program will contain a large element of service. All three are essential for the proper development of the field. The emphasis of the program determines into what category it falls.

### ***How Auspices Affect Program***

The centers developed under social work auspices have stressed a pragmatic search for ways to help children now. They have been short on research, and have not been extensively used for the training of psychiatrists. For the most part, they are supported by community chests and similar fund-raising groups which raise their money largely on the basis of helping a maximum number of people at a minimum cost. On the other hand, several research programs have been developed, supported by foundation grants, general research funds appropriated to a large hospital or a similarly sponsored governmental organization, and through endowed institutions. These institutions often work with a specific category of children, such as the very young schizophrenic, deliberately choosing very severe cases about which little is known in terms of definitive therapy. The third group, frequently under the auspices of hospitals and/or university medical schools, emphasizes the training of psychiatric residents and psychological interns. Because of the extreme shortage of child psychiatrists, some institutions tend to place primary emphasis upon the training of psychiatrists who will teach rather than practice. They are not, at this stage, interested in turning out administrators or clinical directors of residential treatment programs.

These observations point out that auspices are partly responsible for the type of program that is developed. In the competition for the community dollar—and often the

various sponsors of residential treatment centers are in competition for the same dollar—it is too easy to become dogmatic about the preferred form of auspice. The essential question that must be asked is, what does the community primarily want at this time? Its corollary is what children does the community wish to serve? The children who require residential treatment present a wide range of severity of problems. Our classifications of such children are very inexact, and we usually content ourselves with such terms as mildly disturbed and moderately disturbed and severely disturbed.

Many communities wish to expend their available funds in a way that will give service to the greatest number of children who can be treated with the available dollars. Others are willing to spend money on experimental programs designed to treat children heretofore thought untreatable. The community must make this decision.

A few years ago Rabinovitch expounded his concept of levels of treatment facilities. He classified them into six groups:

1. clinic therapy for the child at home;
2. casework or clinic therapy for the child in a foster home;
3. casework or clinic therapy in an open institution in which children attend regular school;
4. intensive total therapy in an open institution where schooling must be provided in residence;
5. intensive total therapy in a closed institution with schooling provided in residence; and finally,
6. the closed long-term institution, the state school or state hospital.

This classification also suggests answers concerning auspices. Let us begin with the last. The closed long-term institution—the state hospital or state school, and a few private facilities similar to these in nature—has always been conducted under medical auspices as has the closed institution with schooling in residence, existing for a shorter term therapy. Categories 4, 3 and 2—work with disturbed children in foster homes, and open institutions which have their own school or send their children to public school—are more commonly found under social work auspices than under medical auspices.

Generally speaking, more social workers than psychiatrists are experienced in the ad-

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### ***Selection***

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ministration of children's institutions, and many people have asked whether, in view of the shortage of psychiatrists today, their time should be used in the administration of these institutions. The large number of such institutions needed in the country requires the utilization of all appropriately skilled persons in both disciplines.

### *Selecting Appropriate Auspices*

Therefore, although it might be appropriate for both types of institution to be administered by psychiatrists or social workers, service programs should be sponsored primarily under social work auspices with appropriate use of psychiatry and other disciplines. Also, certain types of children should not be treated under social work auspices. One such major type present such serious somatic or psychosomatic difficulties in addition to severe personality disturbance that hospital and nursing care is essential. Programs developed for these children must be under medical auspices.

Centers directed primarily towards research and psychiatric training would seem to be organized more appropriately under medical auspices.<sup>1</sup>

Whatever the final decision may be in the controversy as to whether adequate psychiatric training can be divorced from a hospital, this much I think should be said: we must guard against becoming too enamored with the concept of the hospital when planning residential treatment centers. A hospital in the usual sense, involving bed pans, sterile techniques, quiet and order, has nothing to do with the residential treatment center. Often what we attempt to achieve in establishing a milieu that will be helpful to disturbed children is the exact opposite of what we attempt to establish in creating a hospital. Even though concepts of what a hospital should be are changing rapidly, it is a mistake to place residential treatment centers

within a hospital setting. Where they are so established administratively there should be separate programs located geographically in the best interests of the child rather than for the convenience of the hospital.

Disputes about auspices of a proposed treatment center, whether it should be part of a state hospital or another type of hospital or institution, have arisen in several states. I would always favor divorcing residential treatment centers from state hospitals. In most states the physical location of state hospitals is undesirable. They are generally isolated geographically and consequently have difficulty in obtaining the type of staff that residential treatment centers must have.

The residential treatment center needs ready access to community schools, vocational guidance facilities, recreational facilities, and auxiliary staff such as can be found in the graduate schools of most universities. These resources are rarely found in state hospital locations. Furthermore, the financial support that state hospitals have had in the past and the general public's concept of them are not conducive to the maximum development of the residential treatment center. Therefore, for purely practical reasons I would also urge the elimination of state hospitals as an auspice for residential treatment centers.

Perhaps my most important reason for not favoring the development of residential treatment centers on state hospital grounds has to do with the specialized function of the modern neuropsychiatric hospital. Too often children have been placed in such institutions when they could have been far more easily treated on a community level. The state hospital or neuropsychiatric institute should be thought of only for those children who could not be treated on a community level, or by the institutions that Rabinovitch describes in his third, fourth and fifth categories. It is severely handicapped in performing this most important function when it is burdened with mildly neurotic children, delinquent children, or feeble-minded children. The state hospital is an important and necessary part of any state's total services

<sup>1</sup> Whether medical residential treatment programs should be sponsored primarily by hospitals, or as non-hospital programs related to child guidance clinics, or as entirely separate and distinct is a secondary consideration. This is a debate within the field of medicine itself. I do not consider myself competent to discuss it.

for disturbed children. Imaginatively administered and given proper financial support, it can often help promote and develop more appropriate resources for the treatment of disturbed children whom it cannot itself serve.

Finally should such services be administered under public or private sponsorship? This question cannot be answered categorically, for it must be answered state by state, community by community. The answer depends on the types of resources available to both public and private agencies, and the levels of support that the public can afford for each of them. Nine out of ten of the early centers were developed under private auspices. In recent years there has been a gratifying increase in the number of publicly supported services. These have seemed to thrive best under the aegis of public medical facilities, since legislatures are already inured to their high cost. They have a lesser chance under public welfare auspices. And in many communities the level of public services is not conducive to the development of a residential treatment center. In those communities, we must look primarily to private organizations to experiment and pioneer in the development of treatment centers. These organizations must carry heavy responsibility for public interpretation of the need, of the cost, and of their usefulness. For only as a sizable proportion of the taxpaying public understands the need for these high cost programs will they be assured the continuing support essential for their success.

Private institutions are also often better able to take the calculated risk that must go with the creation of a treatment center. When—as they inevitably do—children under the care of the center commit some affront to the community, such as arson or a sex offense, a private organization is usually in a better position to withstand community retaliation than is a public program. However, it is obvious that the scope of the problem is too large to be met by private funds alone. Our hope for adequate facilities will only be realized when there is a large investment of public funds.

## Conclusion

In summary, resident treatment programs should be developed under the auspices of both social work and psychiatry, and by both governmental and private bodies. Those programs primarily concerned with research and psychiatric training, as well as those treating children with serious somatic and psychosomatic disorders, should be under medical auspices. Service programs aimed at treating children for whom there is a known hopeful prognosis can be administered under both medical and social work auspices. I would suggest emphasis upon social work at this time, however, for the practical considerations of experienced available staff and patterns of financing.

Auspice in part determines focus and emphasis. The auspices of any particular center should be determined by what the community wants, needs and is willing to pay for. There should be no conflict as to auspice since all programs are necessarily interrelated. Their very variety, in fact, can enrich the future of children.

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## SYMPOSIUM: PART II

# THE EXECUTIVE HAS A FEW PROBLEMS, TOO\*

### COMMENTS: THE ROLE OF LEADERSHIP

**Stanley M. Richman**

President of the Board  
Family and Children's Service of  
Greater St. Louis  
St. Louis, Missouri

THIS is a stimulating and surprising article. It brings to light a number of problems that agency executives face, which are rarely treated in so personal or introspective a manner. The effective handling of these problems is, in part, a measure of the competency of the executive for administrative work as distinguished from casework. There is undoubtedly some ambivalence experienced by the professional who attains agency executive status. I am convinced that it also exists in all other fields. I am equally convinced that it decreases as administrative competence increases.

I shall make no attempt to treat independently each problem area described by Mr. Hush but a few general observations may be in order, since all of these so-called problems seem to fuse into conceptual uncertainty about the executive's job. The nature of the problems discussed in the article, and the manner in which they are treated, seem to reflect a lack of comprehension of the true role of the executive—not just the executive director of an agency, but any executive.

There is little evidence here of the acceptance of the role of leadership that the word "executive" implies. The article seems to suggest that the principal tools available to an executive are wheedling and compromise. Nothing could be further from the truth. The actual tools are leadership, organization and delegation of authority.

The lay board of a social agency looks to the executive for leadership. It expects him to utilize the full resources of the agency in achieving its objectives. Among these re-

sources is a board of directors whose function is to determine policy. In carrying out this function the board looks for intelligent guidance and counseling from the executive. If the board is organized properly it is a source of strength and assistance to the executive, not a conglomeration of maladjusted, inexperienced individuals with whom he must cope.

The executive must clearly define the responsibilities of all staff members, including his own. Therefore, if an executive is without clearly defined responsibilities and channels of communication it is his own fault.

I see little difference between the role of director of a social agency and that of managing director of a business corporation. In either case the board formulates policy with the counsel and guidance of the executive, who puts those policies into effect through his own efforts and the direct and organized efforts of the staff. In either case the executive causes the agency or the corporation to be interpreted to the public. In the case of the business corporation, the ultimate beneficiaries are the stockholders and society at large. The ultimate beneficiaries of a social agency's work are the contributors and the public. The direct beneficiaries of a business corporation are the customers who receive its product and services. In a social agency the direct beneficiaries are those who receive its services—its clients. Good balance of the interests of all groups, in either case, is the basic responsibility of management, under the leadership of the executive.

Leadership at the moment of decision can be a lonely experience. But this is not the significant characteristic of leadership. Its significance lies in the opportunity it affords the executive to bring about the achievement of the objectives of the enterprise. If those objectives are worthwhile, then the satisfactions which flow from the solution of the problems of leadership are commensurately great. In how many fields are there greater satisfactions from leadership than in the field serving families and children?

\* These two papers complete the planned discussion of Mr. Hush's paper, which appeared in the February 1958 CHILD WELFARE. Further discussion is invited.



## COMMENTS: THE ALONENESS OF THE EXECUTIVE

**Dr. C. Wilson Anderson,**

Executive Director  
Family and Children's Service  
Minneapolis, Minnesota

FEW EXECUTIVES of social agencies, public or private, will read Mr. Hush's descriptive list of the executive's problems without appreciation, wry amusement, and a sense of identification. Such a response is inevitable, for Mr. Hush graphically portrays these problems in terms of the executive as a person; a human being operating in a welter of relationships, carrying a degree of responsibility for decision and action unique to the agency, with only himself to rely on. The question might well be asked, what is there within the person which makes the reliance possible. One obvious answer would be to set forth a list of personality characteristics pertaining to strength and integrity. A less obvious answer is skill for the job. While an individual may be an executive without skill, with skill he is enabled to act more or less expertly in relation to the forces within and outside of himself with which he must contend. Skill, in other words, helps the executive to operate effectively, structures his relationships with staff, board and community, and sustains him where faith and courage alone might not. This kind of skill, however, cannot be defined solely in terms of a group of techniques or tools which may apply to specific situations. Rather it must be defined here as understanding grasp and inner acceptance of the special nature of the executive role and the conscious, disciplined use of this inner understanding in terms of the relationships of which the administrator is the center.

An important element in this definition of skill is identified by Mr. Hush in the statement that the executive is "alone in his particular responsibility. He has to recognize this fact and somehow he has to get used to it." I have chosen this for my comments, since such recognition and acceptance is the beginning of developing administrative skill

in its deepest professional sense. While but a beginning, it is nevertheless perhaps the hardest task of all.

The psychological problem of separation and difference, and learning to bear them purposefully, is not new to social work. All of its practitioners, from caseworkers to executive, face the same problem. While varying in degree, being set apart, aloneness, and guilt as the price for maintaining one's difference from another, are present in each level of social work job experience. The student learning to be a caseworker must find his way into a relationship with his clients in which his own natural impulse to help is not expressed on a wholly free and impulsive basis. He must, through his training, achieve a relationship in which his own needs are disciplined so that he can see the client as he really is, and offer the particular services of the agency in accordance with the policies and procedures designed best to engage the client in the helping process. Until the student worker can achieve this kind of discipline, which involves a sense of separateness and difference from the person whom he is to help, he cannot be considered professionally trained. Without this achievement he will continue to live out his own inner needs in his work with each client.

That a caseworker has solved this problem in relation to the client, however, does not save him from re-experiencing it when he becomes a supervisor. His identification with his workers must sooner or later give way to a greater identification with that part of the agency's program and needs which have now become his responsibility to maintain for himself and for those whom he supervises. While the worker must represent the agency and its way of service to each of his clients, the supervisor must represent the agency even more to his organizational unit and sus-



tain it even in the face of opposition or difference, however momentary, by his particular staff members. He is enabled to do this through his experience, through supplementary and additional training in supervision, through the larger sense of identification with the agency. It helps the supervisor when his own administrative superior expects this deeper identification of him.

When the social worker who becomes an executive must once more re-experience the process of separation, he is truly alone. There can be but one executive who carries the function of the agency with a deeper focus and awareness than that required of supervisor or worker. Further, he must maintain the agency's direction and purpose as a support to individual employees and groups of employees, and their interrelationships, which are determined by the organizational structure. As the executive he must hold in balance all of the human forces which move in complex patterns around him. He is not, or at least should not be, merely a figure at the top of a two-dimensional organization chart, but rather, the center of many movements and relationships. Consequently he must have an absolute and whole-hearted identification with his agency, its program, and its policies. He must know what these things mean to board, to staff, to clients and to the community. He must know how his agency operates and he has the responsibility to represent these things to the whole of the agency and to each of its parts. By virtue of the uniqueness of his position, his participation in the agency's affairs is determined to the degree to which he can identify with the whole of the agency and manifest it outwardly in a form that embodies not only the substance of the agency, but the spirit, his professional quality.

### ***Accepting the Executive's Difference***

The executive could not possibly discharge his task creatively without accepting the difference and separation associated with it. He could not successfully convey to others his identification with the agency unless he can bear the differences such activity will

bring him; nor could he possibly help the members of his staff take on this identification in relation to their individual tasks. Each staff member, whether caseworker or supervisor, desires, through his own skill, personality and purpose, to express himself in his job. This desire, however, must be held in check by the executive whenever its expression handicaps or endangers the functional unity of the agency or opposes the conceptual operation and direction of the whole of the agency which the executive, by reason of his more total identification, more truly holds within himself. To hold opposing desires within the agency's staff in check, the executive must express his difference. If held to by the executive, the expression of this difference is subsequently internalized by the other members of the staff who, in so doing, acknowledge the part of the executive, who must take final responsibility for what is done. Where the executive identifies with the agency service and represents its content and philosophy, the act of final responsibility is a valid expression of this kind of executive participation and control and the staff member also feels its validity. This connection is made, as in any other helping process, through a relationship which, while firmly stressing the administrator's own difference, accepts, feels, and responds to the difference in staff and identifies with them in their struggle to achieve a balance between themselves and their functions as integral parts of the agency.

Basic to the foregoing process, however, is the movement on the part of the executive toward an acceptance of himself as separate and apart. The sense of difference is created by the responsibility of his position and the necessity of identification with the whole of the agency, not to the exclusion, but to the furtherance of all its parts. This cannot but result in separation of the executive from other members of the staff, although within the bounds of common purpose—no matter how he might deny or minimize it. Feeling and acknowledging the sense of separation the executive must then, as Mr. Hush points out, "get used to it." He must, in other

words, internalize it for creative outward use. Once he has achieved this, the executive need no longer attempt to carry his function through the use of external control. Instead, relying on his deep identification with the agency, he finds the controls stemming from an inner part of himself. As such these controls can be put into relationship. As long as the executive's control is dependent upon external objects—as it will be without an inward acceptance of the executive role—the control function will be set aside from the substance of relationship and the staff will be cut off from the only way they have of meeting and working out their differences with executive authority and responsibility.

Finally then, recognition and acceptance of the loneliness of the position is a prerequisite to the development of skill in administration. Early in his struggle to come to terms with his role, the executive must recognize his separateness and difference caused by his responsibility, which requires a broader and deeper identification with the agency than is required of staff members. It is perhaps inevitable that the beginning executive may have to deny this separateness in order to be one with the staff. Yet he is still the executive and while he may for a time rely on external objects of control for maintaining his position, he must eventually accept the separateness. His aloneness, then, becomes a freeing, creative force which his staff can use in furthering the agency and its purpose.

It is difficult to see how this can be accomplished by an executive unless he has the advantage of professional training first as a worker, in which he learns the meaning of a disciplined relationship; and secondly as a supervisor, in which he must identify with and stand for at least a major part of an agency for a group of employees. The executive who has the opportunity to take advantage of further training concomitant with the assumption of administrative responsibility will make the transition more speedily and effectively than if he has to face the struggle without such support. In any event, professional training for the administrator must take the "closer look" at the executive position as set forth by Mr. Hush.

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# THE SOCIAL WORKER AND THE COURT\*

**Naomi Grossman**  
Supervisor of Court Service  
Jewish Board of Guardians  
New York City

*Casework with the child who has come to the court is discussed in this article.*

A RECENT study by the Youth Board indicated that one percent of the population provided 75 percent of the delinquents in New York City. This is only one indication, that there is a very small group of persons in our community who make a marginal adjustment and are chronically known to social agencies, and for whom we must develop more intensive rehabilitative programs. As casework techniques have been further and further refined and private agencies have moved away from some of their earlier functions of providing relief, housing and other material services, this group of families has come increasingly to the attention of public agencies, especially children's courts. The children from these families come to the courts on both neglect and delinquency petitions and are referred by the courts to family and placement agencies and clinics. Often these youngsters are quite sophisticated in the ways of agencies, but resentful of social workers, whom they view either as authoritarian persons whom the court forces them to see, or as disappointing figures who cannot meet all of their fantasies about magically improving their lot.

We are currently developing ways of dealing with these families. The tremendous impact has fallen on the children's court and public agencies who have the legal responsibility, but who must constantly struggle with problems of large case loads, inadequate budgets and personnel shortages. Yet courts are developing creative ways of dealing with delinquent children. Miss Donnelly's paper, "Helping the Child Who Has Come to the Court"<sup>1</sup> illustrates the effectiveness of probation, in its most ideal form, and how a

dynamic children's court program can be a constructive force in the community. Private agencies have the luxury of being able to limit intake and, therefore, are able to divert more time and personnel to developing new techniques of working with this "hard to reach" group. I believe the unique function of private agencies will always be in the role of research and experimentation, as public funds for these purposes are not so easily available. The placement agencies, both private and public, have traditionally worked with these chronically dependent families and have a lot to contribute to understanding them. The best efforts seem to be in combining the talents of both public and private agencies, as in the St. Paul project and the work of the New York City Youth Board.

With these families, caseworkers are only too aware that their techniques, insight and clarification, are insufficient. True, many of the children who come to children's courts can utilize intensive psychotherapy, but for a majority of the families a more complete approach which recognizes the sociological, cultural and economic problems is necessary.

The children's court is at the forefront in developing programs for this population, both in case identification and in supplying the structure and framework for motivating those families which are so caught in the morass of poverty, deprivation and dependency that they cannot move forward. It can provide the impetus for movement as well as structure and boundaries for those youngsters who are seeking limits for the impulsiveness which overwhelms them.

## ***Realistic Use of the Court***

The court is not a "last resort" but may be the first step in getting help. As case-

\* Given at Eastern Regional Conference, February 1957.

<sup>1</sup> CHILD WELFARE, February 1958.

workers both in and out of the court understand its functions and how to use it, the court can serve increasingly as an aid in treatment. However, caseworkers must recognize the court for what it is—a public judicial agency, part of our law enforcement structure. It is not a casework agency. As Gellhorn<sup>2</sup> says, despite the social orientation

<sup>2</sup> Walter Gellhorn, "Children and Families in the Courts of New York City," Dodd, Mead & Co., 1954.

of the court, "traditional protections of the judicial processes [cannot] be lessened in any degree in determining legal rights. Furthermore, the protection of the community must always remain the paramount consideration." For greatest effectiveness, caseworkers must learn to use the court realistically, neither as a treatment resource nor as a bugaboo.

## THE COURT'S AUTHORITY\*

**Honorable Henry G. Sweney**  
President Judge  
Delaware County Court  
Pennsylvania

*The court is not a last resort, but a means of helping the child and enabling the caseworker to help him.*

FOR many years, I have felt that a county like Delaware County, Pennsylvania, was a good place to experiment in government. During those years our population has risen steadily, until today we number over 550,000 people. As judges in this county, our focus has been on how we can make our courts effective and useful to our people; our study has been on how best to use authority.

In this study of the care of children my first hurdle, as a judge, was a basic concept of social work that legal authority and social work procedures will not mix—that social work has something to offer a person who can use it voluntarily while the court has the power only to force compliance. For a long while I sat pretty much alone; on the one hand, with valuable services available to needful people and on the other hand, with people in trouble who seemingly did not need or could not accept assistance. Slowly, we developed the concept that even voluntary acceptance of help had in it a real element of authority, and it began to appear that what we had been afraid of was not authority but the law, the court, the judge with his power over life and death.

\* Given at the Eastern Regional Conference, February 1957.

We began to set up certain procedures in the courts; after five years, we have barely scratched the surface. First, we separated the care and treatment of delinquent children from care and treatment of dependent and neglected ones. We set up a child care service with its own staff in a separate building, apart from the juvenile court, for the care of dependent and neglected children. When a hearing to determine neglect is necessary it is held in juvenile court, but at a different time from cases of delinquency.

Next, we laid down the rule that neglected or dependent children should not be brought to court for hearings. If the judge must talk to a child, it is arranged that he see the child before or after the hearing. Basically, we feel that the child is not responsible for his difficulty and that no good can be served by having him in court, a witness to charges and counter-charges, promises and counter-promises which may or may not be kept, and to a discussion of intimate details of family life, often lurid and always purposeless.

### **Cooperation between Social Worker and Judge**

We started experimenting with the problem of how the worker and the judge could



best function together. I do not think I overstate the problem when I say that the caseworker used to have heart failure when a lawyer called, and the caseworker nearly died when he had to come to court. There was always the very real question of whether the judge should "sell out" to the social worker or the social worker "surrender" to the judge.

It was our thinking that each of us engaged in this work had a real part—that we could do our best work only by acting as a team. Our first move was to have the individual worker come to court as an observer. The hearings are informal, more a conference than a trial, and the atmosphere is designed to put people at their ease. We then moved on to discover that a hearing which merely determined that a child has been neglected by his parents, and gave an order to this effect and custody of the child, was not enough. It became apparent that parents needed to know their rights as well as their obligations. A temporary order with definite objectives was set and a fixed time for re-hearing indicated.

If the above premise is accepted, the worker may bring the case to the judge not only to determine the question of neglect or dependency legally, but to secure the judge's assistance in helping the parents move toward re-establishing their home, strengthening their home structure or releasing their children for permanent placement. This led us to the conclusion that the court's authority could best be used to assist the worker in promoting such movement.

Our cases divide themselves naturally into families still living together but functioning poorly, and broken homes requiring temporary or permanent placement of children. Such homes leave much to be desired, and the caseworker's job is impeded by the parents' failure or refusal to cooperate. Frustrated, the worker turns to the court for assistance. Since our first purpose is to keep children in their own homes, the Child Care Service initiated a protective service. As an example:

A complaint was received about a family in which the father was a hard worker, but left the management

of the home to his wife. She was ill and needed medical and surgical care, which she refused to accept. The three children were running wild, and the neighborhood was up in arms.

When the caseworker started her investigation she was met by the father, who not only refused her services but told her to get out and stay out. At the court hearing, we discussed the legal rights of the parents and the power of the court. The court made clear that it could remove the children but preferred not to. There were two hearings in this case, a couple of weeks apart.

The plan which was set in operation required that the mother go to a hospital, the paternal grandmother be brought in to care for the home and the children and an attempt be made to get the parents to see that the Child Care Service was their friend. The sad sequel to our story is that, after the mother's operation, with the family functioning better, the mother died and the grandmother returned to take her place in mothering the family.

But our purpose had been accomplished—the father knew his rights but also his responsibilities; he knew the court could step in, if the family failed to function properly. He accepted the offices of the worker, at first very much against his will, but later with awareness of the assistance that the worker could bring him.

The worker dealing with separated parents whose children need care meets the same refusal to cooperate. For example:

A husband and wife, parents of four children, were brought before the court. The worker told the story of parents separated, children deserted, excessive use of liquor, and poor work record. The judge explained to the couple that the children were their obligation, and that it was the purpose of Child Care Service to keep the family together. Was there a possibility that the parents might reconstruct their home? Child Care Service was ready to assist. Did they have a desire to keep their children? If the county provided temporary shelter, how much could we expect from the parents in the way of support and maintenance?

### **Helping Parents to Plan**

We can only judge the sincerity of parents by their acts. Forgetting the past, where do we go from here? The parents are told that children need roots, security, love and affection; that children cannot be moved continuously from one home situation to an-



other; that they, as parents, must plan for their children. The caseworker will help them with a plan; they have three months to decide what they will do.

We have found this procedure sound. The movement which it engendered has been good, and even if parents are unable or unwilling to cooperate, they have had their chance to rebuild a home. It is important that they know this; it is often important that the children themselves know.

As far as the Judge and the caseworkers are concerned, I can only say this: Recently I received a thrill and then a rebuke.

A worker called me to say, "Judge, I am having an awful time with the Smith family and I told my supervisor that everything would work out because I was bringing them before the judge."

Later the same day, the Chief of Service called me and said, "Judge, we will have to review court procedures. My staff is getting to the point where they expect you to do their casework for them."

Maybe some of our families in Delaware County do not cooperate, but the workers and the judge certainly do.

## REGIONAL CONFERENCES

### South Pacific Regional Conference

March 13, 14, 15  
Statler Hotel, Los Angeles, Calif.  
*Chairman:* Mr. Milton L. Goldberg, *Ex. Director*  
The Jewish Big Brothers Association of  
Los Angeles, Inc.  
590 North Vermont Ave., Los Angeles, Calif.

### Midwest Regional Conference

March 17, 18, 19  
Savery Hotel, Des Moines, Iowa  
*Chairman:* Mr. Richard Lewis, Jr., *Director*  
Iowa Children's Home Society  
2203 Grand Avenue, Des Moines, Iowa

### Central Regional Conference

March 20, 21, 22  
Sheraton-Seelbach Hotel, Louisville, Kentucky  
*Chairman:* Mr. Howard Hopkirk, *Superintendent*  
Louisville and Jefferson County Children's Home  
Anchorage, Kentucky

### New England Regional Conference

March 27, 28, 29  
Statler Hotel, Boston, Mass.  
*Chairman:* Mr. Robert B. Hill, *Executive Director*  
North Shore Children's Friend Society  
48 Bridge Street, Salem, Mass.

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## EDITORIAL COMMENTS

### *Memo to Executives (Myself Included)*

SINCE our progress as a profession is dependent on the widespread application of what we learn in day to day practice, social workers should be in the closest communication with each other. We should be an outstanding literate group, since writing serves to clarify even the writer's thinking. Unfortunately we are not—talk we will, but write we won't.

The unevenness of practice in agencies of similar functions is, at least in part, evidence that even the best ideas spread slowly. What is practiced in some receives only lip service in others and is not noticed at all by still others. In adoption services, for example, some agencies work successfully with the mothers on their serious personal problems, while others content themselves with assurance of the mother's willing relinquishment, and with provision of immediate care for the child. Where are the articles that would serve both to broaden the vision and expound the method? As the selection of adoptive parents moves more deeply into the evaluation of personality and motivation, where are the published criteria which expose our practices to the critical evaluation of our fellows and of those in related professions?

In foster family day care, where is the discussion of the tangled relationships of the young child with two mothers? Which of us would not want to hear further of new uses of foster care, more about how the agency-owned and group homes help the child with emotional problems? Can we define what we mean by "emotionally disturbed"? What kind of service do we give to children in their own homes when the focus is not protective? What approaches to the adolescent are being used experimentally? This list could be expanded to the limit of our functional responsibilities. To be sure, these topics are discussed, but too frequently only within the agency.

The professional responsibility to report to our fellows is generally acknowledged, but I suggest that executives could, with profit to all, take greater responsibility for discharging it. A readier use of our journals is the obvious course. The staff needs to be encouraged to write. Good ideas should spread beyond the conference, the staff meeting and the agency. The anxieties which accompany exposure to print should be dealt with, perhaps giving the executive an opportunity to polish his own casework skills. The fact that writing is desperately hard work should be recognized and adjustments made to allow sufficient time.

Reporting and creative speculation are more than personal professional responsibilities; they are agency responsibilities. It is the clear course of the executive to see to their discharge.

JOHN G. THEBAN

*Chairman, CWLA Publications Committee*

### SMITH COLLEGE SCHOOL FOR SOCIAL WORK Graduate Seminars

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Mrs. Yonata Feldman

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Northampton, Massachusetts

# A DAY CARE TRAVELOGUE\*

**Winifred A. Moore**

Special Consultant in Day Care  
Child Welfare League of America

*Mrs. Moore gives her impressions as a professionally-oriented European traveler.*

IT is still surprising to most Americans to find that "other people" have many of the same ideas we have, are doing many of the things we do (sometimes better than we), often make the same mistakes, and spend hours discussing the same problems. It is a significant experience to discover that there is no such thing as "a French viewpoint," "the opinion of the British," or "the way they do it in Italy." In every country people disagree about how to do some things, and it is through the process of questioning and discussion, challenge and exploration, that progress is made. This is the most common bond between democratic peoples anywhere.

Visits to nursery schools, kindergartens and day care centers in several European countries can only be recollected within the surroundings of the particular country, city or town, the climate, the architecture and other visible patterns of culture. Through the help of experienced, able and friendly workers, for whose language skill Americans must be ever grateful, I was able to see not only an immediate building with its staff and program for children, but also the hopes and the problems, the achievements and difficulties of its particular program.

This description of some of the high points of my brief visits—sometimes three in one morning, with never more than two hours in one center—can reflect only a few outstanding impressions. Knowledge about variations in group programs for children within any one country—their purposes, sources of support, training of staff, the philosophy and practice of their educational, health and social services—would require serious and thoughtful study, just as in the United States. Variations from country to country

which seem evident at first glance may not be the ones which seem significant after more extensive study.

## Day Care in Greece and Italy

A first impression of a day care center in Athens is of a sand box so full of pink-clad children that it looked like a mass of flowers. Greece, the eastern limit of our travels, impresses one with the great effort which has been needed to care for children and families left destitute and undernourished by the invasion and occupation of war. A country of fabulous beauty, it is so barren and rugged that it requires particular skill and know-how to provide adequate support for its independent and courageous people. The sight of children dressed just alike in play clothes is reminiscent of earlier days in the United States, when many families were unable to provide adequate clothing for their children. In Greece at the end of the war, day care centers were an important channel for providing adequate food and clothing to desperately needy children.

Visiting kindergartens and day care centers—some new, some built before the war—gives one a sense of the capacity and quality of modern Greece. Facilities and equipment are modern and well planned, and health supervision is co-ordinated with community child health services. In a special

\* Many Americans interested in nursery schools, kindergartens and day care services are traveling abroad each year. This summer two conferences being held in Brussels during the World's Fair will attract workers concerned with children from many professions and many countries. The International Union of Child Welfare will meet on July 20 to 26 and the Organization Mondiale Education Prescolaire, also in mid-summer.

effort to avoid regimentation in planning for groups "larger than we would like" of three to six year olds, the individuality of each child is highly regarded and his play opportunity protected. Groups of children under three years old, strictly limited in size, have a high proportion of adults to children. There are some vacancies for children over three, but the waiting list for those under three is long. No more immediate answer to this problem is available in Athens than in most American cities.

While day care services are carried out in a variety of ways with a combination of public and voluntary effort and support, the Ministry of Social Affairs has on its staff a special consultant for children's services, whose interest in day care is keen, and who would find herself quite at home in a discussion of day care problems in the United States.

Day care terminology is a problem in any language. In Italy, a group day care program for children over three is usually called a nursery school or kindergarten; for younger children it is a *creche*, or day nursery. One of the latter which I visited in Rome is operated by the Ministry of Health in a large and impressive, new Maternal and Child Health center. As in Greece, the beautiful marble which gives such an appearance of luxury is actually more plentiful than other materials in other countries! While the staff is considered untrained, it is under the supervision of a Montessori trained teacher for the older children, and includes trained baby nurses.

There is much concern for play opportunities. For example, while the group of two to three year olds is large, space and play materials are ample. Much of the activity is table-centered, but there are also sand tables, areas for house play, and toys to push and pull. The children move about freely, many absorbed in their play, using the varied materials for their own purposes. One large room is used for climbing equipment which we in the United States would like to have outdoors. In the lovely October sunshine, the doors opening onto wide porches, seemingly meant for outdoor play, were closed. I

thought of the roof play area of a day nursery in London, where on a chilly April day the children were going barefoot as the sun came through the clouds.

At the Olivetti works near Milan, just a stone's throw from the modern factory where the parents work and the apartments in which they live, is a large kindergarten with a capacity of 250 children from three years to school age in separate units. Two are in separate buildings charmingly situated near the main one, but with a sense of space. There are play areas at several different levels, one grassy, shaded patio, a wading pool, sheds for play materials, places to use wheel toys, places to dig and gardens not to dig. Indoors, children's paintings and "hangings," pasted bits of cloth in colorful child-cut designs, testify to opportunities for creativity.

Care of children under three years, with special staff and facilities, is limited to 50 children of working mothers—a reflection of the widespread recognition that group care of these young children is not desirable, but that the problem must be met in this way until a better solution is available.

### **Developments in Germany and France**

In Bonn and Stuttgart, both of which suffered greatly from bomb damage during the war, there are many new buildings for kindergartens for children under six, and for day care centers for children of different ages. The ones I saw, generally of modern design, are operated by various religious organizations and by a labor organization, and were located in separate buildings, in a public school, in church buildings and in housing developments. Sensitivity to children's need to play quietly or alone as well as in a group is evident in the generous provision of alcoves or other small spaces adjoining a play room. In several, sound proofing consists of decorative ceiling strips of pleasing design which soften sound without deadening it unnaturally. Materials for house play are always available. Play materials, generally more for table than floor use (a complex and interesting block building made by a group of five



year olds had been left on a table in their play room when they went home) are planned for familiar child purposes—for building, manipulation, and satisfaction in color, texture and shape.

Great attention is given, in Germany, to the day care needs of school age children. In one new parish house for a church operated service, space and facilities for school age children are obviously planned with as much care as those for younger children, with areas for doing homework—alone or with a small group—and hobby areas with space and equipment for various activities.

In Paris, I visited L'Ecoles Maternelles, kindergartens operated by the Ministry of Education and open to all children between the ages of two and six whose parents wish them to attend. This is a startling achievement and a very recent one. While 80 per cent of all five year olds are enrolled in these kindergartens, only 20 per cent of children under four are enrolled—a choice which parents might be expected to make in any language. Here, too, space for individual play is provided. While play rooms, full of tables and chairs as well as children, were the center of most activity, the wide hallways with windows, usually along the sides of the buildings—with tubs of water, sand and small pebbles, paints and easels, and plenty of aprons—are imaginatively used for individual play.

### ***Scandinavian Impressions***

It was summer in Copenhagen, and a group of children in one nursery school were planning with their teacher for a month at camp together. Interesting outdoor play equipment consisted of huge, smooth tree trunks with branches, lying on one side for climbing, and piles of logs arranged in various ways. In the Adventure Playground children had built an incredible variety of houses for themselves from "scrap" materials. In one nursery school, housed in an old farmhouse now in a built-up area, surrounded by apartment houses, the grassy orchard had been kept for play in addition to other cleared and well-equipped play space,

and an area for small gardens planted by the children. Over and over again an American in Europe is impressed by the care for land, trees and other growing things. New space is constantly in demand in Copenhagen, but when official decisions are made concerning the use of land, children are given a high priority, and a right to a place in the sun.

In Oslo, the use of color has a particular reason. I was reminded of the long winter when the sun appears for as few hours as it sets in mid-summer! There is a special quality of homyness about Norwegian nursery schools and kindergartens—a lack of confusion, perhaps, about the difference in needs of young children at home and at school, and greater acceptance by society of the needs of children and of parents than is evident in the anxious pressure so well known to Americans. There are a number of new buildings for group programs, each of different design. One, which has the turf roof of the old Norwegian farms, has both a short day kindergarten and an all-day group. All over Oslo, small groups of children with a "park aunt" in charge were evident in various fence-enclosed, partly sheltered outdoor play areas. These are licensed and supervised by the Ministry of Social Affairs.

I discussed teacher training with an inspector of the Ministry of Social Affairs, which has responsibility for all services for children under school age. She was about to leave on a field trip to the towns on the edges of fjords and in the valleys of the snow mountains. All the questions asked in every country about discovering and training the right people to work with young children were familiar to her. It is significant that admission to teacher training for work with pre-school children currently requires prior completion of a short course in domestic science and one in infant care. In Norway, home and family arts are culturally recognized and accepted, and assumed as basic to the care and guidance of Norwegian children.

### ***Nursery Schools in London***

In London, the nursery schools I saw have an "indoor-outdoor" program. Play rooms



open out on one whole side to a terrace or yard, and children were free to play indoors or out, instead of by schedule or program. Here, as in Norway, there seems a subtle quality of mutual confidence between staff and children. There is more conviction and less confusion about discipline; more living of it and less talk. Children are trusted out of sight of a teacher, around the corner of the building in a grassy spot, or in some nook or cranny of the garden just made to be alone or to talk with a few special friends.

The Rachael McMillan Nursery School bears a name familiar to all American nursery school teachers. Unfamiliar to them or to the McMillan sisters would be the imaginative use of bomb-sites adjoining the play area. Here, in the midst of Deptford, a very old and poor industrial area of London, are the "field" and the "meadow." Each is the size of a city backyard, the rubble long since cleared and replaced by grass, shrubbery and a roofed-over area. It is only a few steps down through a garden gate to either of these from the nursery school, and each becomes upon occasion a picnic spot, or the goal of a special expedition.

More and vivid impressions keep coming to mind, but it all adds up to this: understanding of children is not limited by national boundaries. In each of these countries we can find professional colleagues who "speak the same language" whether or not it happens to be English. Inter-professional participation in nursery schools, kindergartens and day care services is an international fact, with Ministries of Welfare, Health or Education having major responsibility, and public and private resources combined in a variety of ways. Our colleagues in other countries are concerned with all the same problems with which we are. They have access to the same knowledge of child development; they understand the value of play as a child's way of learning; they have the same convictions that the child's family is of primary importance to him. Imagination and creativity is evident in their buildings, play materials, and varied programs. We have much to learn from them as well as to exchange and share.

## Conference Employment Service

In 1958, a public employment service will again be a feature of the National Conference on Social Welfare. This service, made possible by the cooperation of the National Conference, National Social Welfare Assembly, Social Work Vocational Bureau and the U. S. Employment Service, is available only to those attending the Conference. However, there are 1,800 state employment service local offices throughout the country, all of which accept social work orders and applications on a year-round basis as a regular part of their service. They also have appropriate forms for advance registration for the Conference service, and will help employers and applicants in preparing them.

*Employers wishing to use the service* should register vacancies at the nearest local office of the State Employment Service, asking that orders be forwarded to the Conference if they have not been filled by April 18.

*Social workers interested in positions* should register at the nearest local employment service office. Included in applications should be a brief resume of education and experience, job and location preferences, and desired salary, which will be attached to the employment service form. Job applicants should request their applications forwarded to the Conference if they have not been satisfactorily placed by April 18.

Registrations will be taken at the Conference, but quicker and better service will result from advance registration.

*Each employer or applicant must check in* at the Employment Service Center immediately on arrival at the Conference, so that his earlier local registration may be activated. The Employment Service will interview each applicant, referring him to vacancies in accordance with his interest and qualifications. The applicant is then responsible for making an appointment with the employer.

All orders and applications filed will be returned after the Conference to the local employment service office, which will follow through as to whether they have been filled. If they have not, the local office will continue to try to effect a satisfactory placement through the regular employment service machinery.

**Deadline for Advance Registration: April 18, 1958.**

# WHAT CAN WE DO FOR MIGRANT CHILDREN?

*This is a report of a state-administered day care center for migrant children, made possible by federal funds.\**

THE needs of the children of seasonal migratory laborers have in recent years rightfully stirred the public conscience to the point where governmental responsibility was clearly indicated and action demanded. Recognizing that the organized migrant farm workers are an integral part of the agricultural economy of the northern states, and that the whole economy benefits, federal and state agencies feel a responsibility to meet the social, health and educational needs of these workers and their children. Problems for migrants within the camp set-up and in their temporary communities are similar to problems in any community. However, because these people are actually uprooted, their normal needs—housing, working conditions, work itself, health, and care of children—are more acute.

Although progress has been made toward community acceptance of these people as human beings with strengths, weaknesses, and needs of their own, it is still in the beginning stages. Many still look on the migrants as a "necessary evil" rather than a vital asset to community living.

In a region of an eastern state, 2,100 migrant workers were brought in to work in the fields. They brought with them 319 children between the ages of infancy and fourteen years. Plans had to be made to meet the social needs of all of them; particularly of the children.

The center was the responsibility of a state interdepartmental committee, and the bureau of children's services of the state department of welfare provided the professional services of a day care consultant and a full-time caseworker, and funds, and arranged to have the \$9,990 allocated by the state and the federal government administered by the head of the department of child

development and family relationships of the state university.

A house was found which offered ample grounds for safe outdoor play and could be equipped to serve thirty children from two to six years of age. During the week before the center was opened to the children, the staff planned for the program. The caseworker and the day care consultant used this time to make community contacts and to visit the migrants' camps in preparation for enrollments.

The staff realized that it is important to parents to meet the teachers who will be caring for their children and to see for themselves where the children will be. They knew what separation would mean to some of these children, who had never been away from their families. Therefore they planned a housewarming to stimulate the parents' participation. This also served to awaken favorable community interest in the new program among community leaders such as ministers, educators and local agency personnel.

All of the fifteen children who were enrolled for the first day came, as did seven of their mothers. Their transportation was arranged by the center. After being taken on a tour of the facilities, some of the children seemed ready to start right in.

The staff included two graduate teachers, one of them the head teacher; three students of child development from the university; a cook, a bus driver, and a maintenance helper who lived in the community; and the caseworker, under the direction of the day care consultant. The group from the university applied their specialized skills and under-

\* From Migrant Child Care Center, Department of Public Welfare, Bureau of Children's Services, Commonwealth of Pennsylvania.

standing toward making the center a truly usable resource. However, it was felt that the teaching staff of five was undermanned, and that an additional teacher would have made possible more individual attention.

### ***Activities Planned for the Children***

The children were picked up and returned home by the center's bus. A scheduled program, varied enough so that each child could take part in activities which interested him, occupied the nine hours the children were in the center. The program included free play, planned indoor and outdoor activities, arts and crafts, story time and music, a morning rest period and a three-hour afternoon nap. The children were served a hot breakfast on arrival, a mid-morning snack, a well balanced appetizing dinner at noon, and milk and cookies in the later afternoon.

Arts and crafts allowed the children to express themselves creatively and helped the teaching staff to become acquainted with their individual personalities. As is true among all groups, some of the children showed a flair for creative expression, many had a good sense of rhythm, and they all enjoyed music. The doll room and the music corner were popular. Special events included a birthday party for the group (it was not possible to celebrate individual birthdays), and picnic lunches on the lawn.

There were a few problems at first, mostly in relation to separation from parents, meal-times, and sleep times. Some of the children fought sleep by temper tantrums, others by excessive crying; some pretended illness and others made excuses for frequent trips to the bathroom. But the teachers were understanding and the problems gradually resolved themselves. The children really needed sleep, since the camps where they lived did not provide enough opportunity for rest.

The greatest amount of discipline seemed needed at rest time in the morning and at nap time in the afternoon. The vocabulary used in other nursery schools had to be changed in order for these children to understand what was meant. Reasoning and

understanding were occasionally backed up with a spanking. Perhaps this was needed because the children had most of their lives been disciplined physically and did not readily respond to any other form of discipline.

The parents took pride in preparing their children for the center. Younger and older brothers, sisters and friends envied the children who attended the center. While some of the children were adequately dressed, others needed clothing and shoes, and were sometimes absent because of lack of clothing. Parents who requested help with clothing were referred to local church groups, which responded generously.

### ***The Caseworker's Role***

The caseworker handled the application process which took place before actual interviews with parents. She made daily contact with the Bureau of Employment Security to learn which camps had been opened, and how many children were in each. She then saw the growers, in order to obtain permission to visit in their camps, to help them understand the function of the center, and to get their thinking on how the center could be of help to the migrant families.

The crew leader, the key figure in the migrant program, actually brings the workers to the picking site. His interest in the program is similar to that of the grower, but his relationship with the crew gives him a real understanding of the advantages of the center to the children, their parents, and himself. Some crew leaders visited the center and were pleased with the program. Their interest and cooperation extended to their bringing groups of children to health conferences.

Meeting and interviewing the parents followed these preliminary contacts. Group meetings were held first, then individual interviews with those who were interested. In these interviews the caseworker discussed the purpose, program and staff of the center, the fee, and the responsibility of parents and center to each other. If the parent then felt that this kind of care would meet his and his

child's needs, and decided to enroll his child, specific plans were made. The caseworker explained that medical examinations were necessary for all children coming to the center and obtained a developmental history and a signed medical consent card if immunization was needed and requested. The parents willingly gave information which would be helpful in working with their children, such as information on food fads, allergies, and any unusual behavior problems. They also designated a responsible person at camp with whom the teachers could leave the children at the end of the day, should they themselves still be working in the fields.

The caseworker acted as a liaison between the children and the center, taking up any mutual problems. This made for continuity since, although parents were always welcome at the center, their work requirements seldom allowed them to visit. The caseworker picked up a new child on the first day in order to introduce him gradually to the center. After the teacher helped a child feel part of the group, he had no difficulty joining the others on the bus.

Information about the center was transmitted by the participating parents to those in other camps who had not been reached. While this spreading interest was gratifying, it was of real concern that services could not be extended to more children who were eligible.

The need for the center and its popularity can be measured by the fact that it had an attendance of 80 to 100 percent on twenty-six days, or more than half the days it was open. Of a total of forty children, thirty-two or 80 percent, attended for four or more weeks; twenty-one attended six or more weeks.

### **Effect of Center on Migrants**

The center affected not only the children who attended, but other children in the camps and adults as well. Although the service began on a basis of day care, it did not end there. As with any helping resource, people found means to use it to help them with their other problems. Thus, as knowledge of the center broadened, its function broadened. Since having a caseworker was an experiment, efforts were made to solve problems in accordance with need and with requests for assistance. Among the problems that arose were these:

Unaccompanied teenagers had "come along for the ride" without understanding the problem they presented to themselves, the camp and the community. Through the use of existing resources, it was possible to return these youngsters to their families.

A young mother needed special care for her five-month-old infant when he became sick, not only for the baby's sake but so she could start work. She had understood when she signed up for work that some kind of care for babies would be available. Since there was no infant care, a foster home was considered. A family was studied, and their home approved. The placement worked out to the satisfaction of the mother and the foster parents, and in the best interest of the baby.

Three children ranging in age from three to seven were found locked in a room at camp while their mother was in the fields. This was not wilful neglect on the mother's part, but the only way she could think of to keep her children safe. These children could not be enrolled in the center because the quota was filled. It was arranged for a camp assistant to supervise these children.

An unmarried mother wanted to release her newborn baby for adoption and asked for help in planning. The prospective adoptive parents were also migrants in the same camp, and wanted to follow the correct procedures in accomplishing the adoption.

Plans were worked out for prenatal care, confinement and after-care for a pregnant woman.

A disturbed lone migrant received word from home that his twin babies, born while he was at camp, had died. He wanted help in working out the best plan for his wife and family. This was managed while he remained at work.

A crew leader asked for help for a young worker who was having epileptic seizures. Medical attention was obtained and a change in work arranged in accordance with the doctor's recommendations, through the crew leader.

Parents of school-age children requested help in enrolling their children in local schools. The schools had raised questions because of overcrowded buses, and because the children would be attending only for a short period. A plan was worked out jointly with the school, parents, and the caseworker, which resulted in sixteen children being enrolled.

There was a noticeable change in some of the children who, in the beginning, found it hard to relate to the group and to share with others. The response and warmth of the teachers helped the children toward a real feeling of acceptance, and developed mutual affection.

One little two-year-old girl was outstanding in the way she was able to move into the group, after a stormy beginning. This was her first separation from her mother, and for the first three days she had to be carried most of the time by the teachers. It was thought that she could not go on at the center, but with the help of the teachers and work with her mother, she was enabled to use the center constructively and find a real place for herself.

It would seem, from the way the children were able to use the center and how deeply they involved themselves, that it would enable some of them to have a real growth experience.

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# THE NEEDS OF ADOLESCENTS IN FOSTER CARE\*

Elizabeth G. Meier

New York School of Social Work†  
Columbia University  
New York City

*This paper discusses aspects of the theoretical knowledge regarding adolescence which affect the kind of care provided for adolescents in foster care.*

"**ADOLESCENCE**" is a fine word coming from the root word "to nourish" from the period of childhood into adulthood. But even the word "adolescent" has come to be suspect. Indeed, occasionally one hears it used with vehement hostility, as though it were profane or obscene. Adolescence had been regarded as, and still is to a certain extent, a period in which the young person makes a choice. In some religious groups, this is the time to be confirmed, in schools it is the time to be graduated. In earlier societies other kinds of puberty rites initiated boys and girls into adult mysteries, and welcomed them as productive members of the group, ready to make their contribution to its progress.

Erik H. Erikson, in "The Problem of Ego Identity" calls adolescence the period of "psycho-social moratorium"—the period in which a society favorable to growth and development gives the young person time to make up his mind about himself. But by the close of this period he is supposed to have committed himself to knowing who he is, what he is and where he is going from there, to find a niche for himself. "In finding it," Erikson says,

"the young adult gains an assured sense of inner continuity and social sameness which will bridge what he was as a child and what he is about to become, and will reconcile his conception of himself and his community's recognition of him."

He points out that identity formation has its roots in the life-long development of the individual prior to that time. The adolescent builds on all of his equipment, physical and intellectual, on all his life experience, good and bad; he uses all his previously developed skills and capacities. Ego identity takes into account the love that has been given or withheld from him, and the successive identifications and the ideals which he has incorporated. Erikson points out that "the process

of identity formation emerges as an evolving configuration."<sup>1</sup>

## **Who Are the Adolescents in Foster Care?**

Foster care agencies have tended to emphasize the "temporary" nature of the care they give. Factual data does not always bear this out.

In New York City, for example, a study by the Health and Welfare Council revealed that of the 4,038 children fourteen years of age and over in foster care placement at public expense on November 30, 1955, slightly less than one-third (32.7 percent) had been in care less than three years; slightly less than one-third (31.6 percent) had been in care from three to eight years, and slightly more than one-third (35.7 percent) had been in care more than nine years. Of the fourteen and fifteen year olds, 20.5 percent had been in care more than twelve years and of the sixteen and seventeen year olds, 30.9 percent had been in care more than twelve years.<sup>2</sup>

In other words, most of the adolescents in foster care came to us as babies, toddlers and preschool children. The real question may be not so much "How do we plan for adolescents in foster care?" as "How do we plan for children so that when they reach adolescence, they will have long since been returned to a rehabilitated family or have achieved a family of their own by adoption?"

Some are optimistic that practically all children can either be returned to their families after a short period of foster care or placed in adoption and that, consequently, long-time care is seldom necessary. I am inclined to believe that long-time care will continue to be necessary for a considerable number of children. However, the prognosis that a child will need long years of care should be based on knowledge of parental capacities and on the child's needs. A child should not drift into long-time care.

This has considerable bearing on the type of foster home chosen, assuming that foster home care is the choice for young children who need long time care. With prospective

\* From a speech prepared for the Child Care Institute of the Federation of Protestant Welfare Agencies, New York City, May 9, 1957.

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<sup>1</sup> Erik H. Erikson, "The Problem of Ego Identity," *Journal of the American Psychoanalytic Association*, January 1956, pp. 67-71.

<sup>2</sup> Welfare and Health Council of New York City, *Fact Book on Youth in New York City*, April 1956, p. 94.

foster parents too, we have tended to emphasize the "temporary" nature of the care and have looked askance at foster parents who frankly wanted a child for a long time. Perhaps we need to be more willing to consider such a couple, placing with them the child for whom long time care is probable, and working with them to accomplish permanence in the placement.

Children coming into care nowadays are likely already to have suffered considerable personality damage. Many of them come from homes torn by marital strife, emotional instability, or mental illness. Frequently their parents' behavior grossly deviates from what society expects from adults. Sometimes there is criminality, sometimes other manifestations of character disorders.

Children from these situations frequently show markedly uneven development, manifesting little consistency in such areas as taking care of their own bodies, ability to manipulate objects, body control, intellectual achievement, relating to adults, getting along with peers. They are normal or above normal in some ways, far below expectations in others.

We have believed, rightfully, that the most important aspect of emotional health is the capacity for relationships, and have concentrated on this in our efforts to help children. It may be, however, that for such children the initial casework focus needs to be on finding ways to help them overcome these developmental lags. This means that we must know how to look for defects in ego development and to identify them so that the casework treatment is focused on helping the foster father, the foster mother and others become more purposeful in their efforts to help the child. Special tutoring, the use of tools and materials, group membership, swimming and dancing lessons may seem minor, but they can be very important in helping a child erect constructive defenses against the anxiety arising from his anger and his sense of helplessness. Bodily skills and intellectual achievements may provide channels for the sublimation of instinctual needs.

### ***Problems Heightened at Adolescence***

Of course, the capacity for relationship is the most important quality in the development of the individual. Nevertheless, a youngster emotionally crippled by the malignancy of past unhappy relationships may first need help to gain strength in that part of his ego concerned with his perception

and his mastery of the inanimate aspects of external reality.

Erikson's concept of "ego identity" is dual. It includes consistency and gradual evolution from what the adolescent was to what he is about to become. Secondly, the individual's concept of himself is consistent with the community's conception and expectation of him.

A child's feelings about his parents and about being in foster care cannot be dealt with all at once, for the nature of these feelings is different at different levels of his development. All adolescents must re-settle that issue which presumably had been "settled" at the close of the Oedipal period, the matter of sexual identification. For the child in foster care, this has special problems. As daydreams, yearnings and actions toward the opposite sex become more substantial the adolescent in foster care is plagued more insistently with "Who am I?," "If even my parents did not love me, am I fit to have a decent girl friend?," "How can I tell him—or her—about my family?" As sexual urges come to consciousness, new fears arise: "Is it safe for me to have such feelings? Will I turn out to be like my promiscuous father or mother?" "Do I have bad blood?" "Dare I have children, or will they inherit the bad things about my father or mother?" Such doubts, so close to the core of the child's being, cannot be voiced except within a relationship with a sensitive caseworker who is ready to hear them and wants the adolescent to grow into sexual maturity with its concomitant pleasures and responsibilities.

Conversely, for some children, adolescence may revive wishful fantasies about the parents. If we have encouraged a continuing relationship with parents, brothers and sisters, aunts and uncles and other meaningful relatives, reality rather than fantasy will probably guide the child's expectations. Vacation periods with his family while he is still in foster care make it possible for us to help him with his feelings about the current family situation.

Although we recognize the importance of continuity in relationship with parents, we do not always exploit the values of other continuities. If parents continue to live where they lived prior to the child's placement he returns to that neighborhood to see them, but if they have moved we do not often take the child for a return visit to his old neighborhood. Since child welfare responsibilities are often segmentalized in large cities, caseworkers probably seldom see where the chil-

dren lived prior to coming into care, or may not know anyone whom the child knew previously, other than relatives. The child's return visit to neighbors and neighborhood, school, church, street corner and gang might bring about a variety of results: a release of a flood of recollections with which the worker could then deal; a correction of some distortions and a readying of the child to incorporate into the present the past as it really was; or the possibility of making use of constructive earlier experiences. Naturally, such visits depend upon the child's inclinations.

At adolescence, and before, the child needs the active consistent interest of foster parents and worker in his vocational and educational plans. These adults must not only meet his current childhood needs for love and care, but must also help him think of his growing up and "becoming somebody" who has continuity with what he now is, thus achieving his "ego identity."

We help the child assume independence and responsibility gradually. He gets part-time jobs to earn money, first for things that it's fun to buy, and later for more prosaic necessities. We talk with him about what he is likely to earn and how to budget for his needs. The foster father shows him the lists of deductions for union fees, insurance, bonds, and taxes. The adolescent may even thereby take on another adult identification—he's going to be a taxpayer! Preparation for a job may involve use of psychological tests and vocational counseling. To avoid "just a job because I have to," we encourage specific planning. Although such matters as working conditions, salaries, and fringe benefits may be approximately the same for file clerks in a department store and in a factory, it may give an adolescent girl a much more real sense of direction to know that she is aiming toward one or the other, and that she has a choice.

### **Adolescents Who Come into Care**

Some boys and girls do not come into care until they are adolescents, and at that time, a choice of type of care must be made. But we no longer think there are only two kinds of foster care—institutions and foster homes—since we now know that there are many subdivisions within these two: study homes, treatment institutions, residential treatment centers, group homes, subsidized homes and others.

Definitions of these terms are not yet so precise as we hope they will become. What characterizes these facilities is considerable

experimentation with setting up a variety of facilities to serve particularized needs. Some of these arrangements are a cross between foster homes and institutions. The group home, for instance, means in some definitions that foster parents who are salaried in addition to receiving board payments provide care in a family home within the community for a group of adolescents whose problems are such that they could not be accepted in the usual foster home. This has the advantages of a setting in which the adolescents are a part of normal community life. The group influence is used to deal with some of the problems of aggressive behavior. The setting and the foster parents permit, but do not require, the development of close relationships.<sup>3</sup>

If we try to select only "motherly" foster mothers, we may be excluding some foster parents who could provide good experiences for adolescents—those who have warm relationships, but who in foster parenthood find their primary satisfactions from knowing that they are instrumental in fostering a child's development. These foster parents are "teacherish" rather than "parental." Some adolescents can use the former type of relationship but not the latter.

Institutional or quasi-institutional care does not make it permissible to spread casework services more thinly. Indeed, when troubled adolescents are taken into care they need a great deal of individualized help whether or not they are living within a group. Nor does the necessary development of psychiatric consultation cut down on casework need. Foster parents in these group arrangements need much support and guidance if these plans are to be truly therapeutic. The caseworker must increase the dimensions of her competence to include an understanding of group interaction, but she must continue to offer individualized casework. Esther Glickman has pointed out that with disturbed children in placement we carry a dual role: supervision of the foster home and treatment of the internalized conflicts arising from the child's earlier relationships.<sup>4</sup>

As we receive more adolescent boys into care, we need to attract more men workers to the field of child placement. In the past, we tended to discount the importance of the caseworker's sex perhaps in an inappropriate

<sup>3</sup> Florence Fisher, *The Group Home*, Child Welfare League of America, 1952.

<sup>4</sup> Esther Glickman, *Child Placement through Clinically Oriented Casework*, New York: Columbia University Press, 1957.



application of psychoanalytic theory to casework practice. When the unconscious is the subject of inquiry and the transference aspects of relationship are analyzed the patient is able to cast the therapist in whatever role his needs require, regardless of sex, age or other objective facts, for the unconscious is irrational and timeless. But the caseworker is not dealing with the unconscious; the realities of the worker's sex and age may aid or hinder the child in developing his own sexual identity, through identification with the worker.

### "Failures" in Foster Care

Unfortunately, in some instances, young people who are discharged from the agency after years of care seem to throw overboard all the values, all the sense of self-worth, all the efforts expended in their behalf. These are the boys or girls about whom we receive letters of inquiry from state reformatories a few years after they have left our care; the girls who bring back to us their illegitimate babies; the boys or girls whom we see ten years after discharge when they are parents whom the children's court judge has declared neglectful. We hope that most children cared for by agencies turn out well, but we do not really know the extent of our "success."

Numerous "failures" are sufficient to make us ask why. Some children come to us already too damaged for us to help them very much, at least at our present level of knowledge, skill and facilities. In other "failure" situations, prefoster care damage is probably not the cause of later breakdown. These are "agency-made failures."

Erikson contrasts "ego identity" with "ego confusion," a condition which manifests itself sometimes in delinquency and sometimes in other forms of social and personal breakdown. The conditions which he describes as predisposing to ego confusion are sometimes the very ones into which the adolescent is precipitated when he leaves the agency care. Erikson writes

"A state of acute identity confusion usually becomes manifest at a time when the young individual finds himself exposed to a combination of experiences which demand his simultaneous commitment to *physical intimacy* (not by any means always overtly sexual), to *decisive occupational choice*, to *energetic competition*, and to *psychosocial self-definition*."<sup>6</sup>

The adolescent leaving the care of the agency has less opportunity than does one who lives with his own family to use that period of "psychosocial moratorium" which Erikson believes necessary to achieve ma-

turity. He cannot move back and forth so readily between dependence and independence. Also, economic need sometimes precludes the possibility of much constructive experimentation with job choice although there may be a great deal of drifting from job to job and loss of jobs. And sometimes when he finds himself no longer welcome in the foster home he must again face the stark reality that these people don't belong to him. Unfortunately, some foster children, particularly those who have been difficult and unsatisfying to their foster parents, know full well that the foster mother is waiting for the time when she can with a more or less easy conscience tell the child that now he must go, she has done all she could for him.

The results of having no choice in these matters may be similar to what Erikson says are the consequences of "avoidance of choice,"

"... any marked *avoidance of choices* . . . leads to a sense of *outer isolation* and to an *inner vacuum* which is wide open for old libidinal objects and with this for bewilderingly conscious incestuous feelings; for more primitive forms of identification; and (in some) for a renewed struggle with archaic introjects."<sup>6</sup>

Child welfare workers can translate this all too readily. The adolescent feels cast adrift and returns to the parental home with all of its pathological aspects, resumes his relationships with parents though they are full of conflict, sloughs off the aspirations he had earlier, renounces his identifications with foster parents, and then bases his behavior on the archaic early identifications with inadequate parental figures.

We hope, surely, that in most instances a child leaving the care of the agency could still remain in the same foster home, paying his own board. Since this cannot always be realized, the "residence club" run by the agency for its "graduates" is valuable. Although the adolescent may spurn the offer of this living arrangement, the fact that it is available for him to choose *not* to go to is important. At least, he *has* a choice. The institution located outside of the city where the graduate is likely to live and work needs such an accommodation as a stepping stone between institutional living and independent living arrangements. If for some reason the boy or girl discharged from our care is not retaining continuity of relationships with foster parents, or even with the less intimate associations in the foster home community, then it is vitally important that we extend some kind of relationship in after-care.

<sup>6</sup> Erikson, *op. cit.*, p. 79.

<sup>6</sup> *Ibid.*, p. 79.



The data previously given indicate that most adolescents in care in New York City came to agencies as babies, toddlers, and preschool children. While I am sure that the need for long-time care will continue, I am even more sure that our sins of omission deprive many children of adoptive families. The report "Children Deprived of Adoption" indicated that adoption would be a sound plan for one-fifth of the children now in long-time care.

### **Preventing the Need for Long-Time Care**

Sometimes we fail to use our diagnostic understanding to bring about the parents' voluntary surrender or the courts' termination of parental rights. We are reluctant to hold parents to realities when they tell us of visionary plans, for fear we will jeopardize our "relationship," forgetting that the professional relationship in casework has the purposes of dealing with problems, effecting changes and encouraging growth. Relationship is not supposed to be only a non-productive concomitant of concrete services. Sometimes we are fearful that the parents will remove the child from care and subject him to very damaging experiences. In some instances this is so, but in others we have forgotten that the children already have the protection of commitment. Sometimes plans which have been started are abandoned when there are staff changes or transfers of cases.

Child welfare workers frequently distinguish the responsibility of foster parents from that of the placing agency by saying that foster parents are responsible for day-to-day care decisions whereas the agency is responsible for long-time planning. As persons with professional responsibility, we dare not take pleasure in the development of a baby or a toddler in a foster home without thinking ahead to the time when he will be a school-age child, an adolescent and a young adult, still without a family of his own and possibly by that time having had a succession of placements. Such breaks in experience interfere with the continuity of relationships necessary for the development of emotional maturity.

In most communities it is more difficult to place older, Negro, and handicapped children for adoption than it is to place the healthy young baby of the dominant cultural group, but agencies are making concentrated efforts to place them. New knowledge and new skills for serving these children are being

developed, but more effort is needed. To provide adoption placement for the adoptable child *now* is the best way to serve that child who will be an adolescent a decade from now.

### **Katherine E. Griffith Joins League Staff**

The League is pleased to announce that Katherine E. Griffith, Executive Director of the Diocesan Bureau of Social Service, Archdiocese of Hartford since 1935, is joining the staff as field consultant. Miss Griffith received her professional training at the National Catholic School of Social Service, and was also a member of the faculty of that school.

Miss Griffith has been close to League activities for many years, serving as Chairman of the New England Regional Conference, of the League's Program Committee for National Conference, member of the Committee on Function and Program of the League, panel member of the Membership Committee, presently a member of the League's Publications Committee.

She has been active in community planning at a local, state, national and international level.

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<sup>1</sup>Welfare and Health Council of New York City, *Children Deprived of Adoption*, August 1955.

## NEWS FROM THE FIELD

### *Finding Negro Adoptive Homes*

SOUTH CAROLINA has made some progress in placing Negro children in Negro adoptive homes. They report that "at least we have made a dent."

There are probably two contributing factors:

The workers' belief in the need for adoptive homes and their belief that there are parents interested in adoption, and the workers' recognition of the need to reach these parents through interpretation and by educating communities, groups and individuals.

Individual and group contacts have been made with ministers, physicians, nurses, midwives, attorneys, teachers, and references; also at civic organizations, clubs, churches, schools, and meetings of foster parents and potential adoptive parents.

For example, a Negro child welfare worker, invited to a club meeting discussing child welfare services, emphasized the agency's adoptive service program. As a pebble thrown into a pond causes widespread ripples, so the news of adoptive services spread from friend to friend—even to a distance of over a hundred miles. Another worker, discussing child welfare services upon request of a high school social study class, emphasized adoptive services. Another and one of the most successful ways of reaching prospective adoptive homes is through adoptive parents themselves who are representative families.

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## READERS' FORUM

### *To the Editor:*

We are struggling with the problem of the adult warrant. The Juvenile Court in Rhode Island feels strongly that this agency has an obligation to sign adult warrants, which the agency is permitted to do by law. The community questions why neglecting parents are allowed to go free, and the judges feel that parents should be brought before the court on an adult charge of neglect of children. Police are empowered to do this, but do not like to do so and frequently refuse.

The Juvenile Court is thus asking us to carry this responsibility. We feel, occasionally, that it might help to have a parent brought before the court and put on probation, but in the large majority of cases of neglect of children we feel it should be regarded as a human social problem rather than criminal.

What is the thinking over the country? I would appreciate any help.

### EDITOR'S NOTE:

We asked the two judges who contributed the statements on the court's position in the League's pamphlet, "Caseworker and Judge in Neglect Cases" to state their opinion.

### *Reply at the Editor's Invitation:*

The question of criminal jurisdiction over adults in juvenile courts has been discussed at great lengths in state as well as national conferences of judges. The prevailing opinion among judges, generally regarded as leaders, has been consistently that the Juvenile Court should not entertain petitions or charges against adults responsible for either the delinquency or neglect of the children before it. These judges feel that, if the authority of the court is to be used for the rehabilitation of the child and his family, the rapport between the parents and the court or other agency to whom casework service is delegated should not be jeopardized by criminal procedures against the parents.

This, of course, does not mean that these judges are opposed to criminal statutes being

enforced against adults contributing to delinquency. In the case of parents the feeling seems to favor criminal statutes being invoked only in cases of gross neglect, brutality or cruelty. Criminal prosecutions should be brought in other courts having jurisdiction.

The above reflects my own thinking, despite the possibility of judges whom I highly respect not agreeing with me.

VICTOR B. WYLEGALA

*Judge, Children's Court of Erie County*

### ***Another Judge Gives His Opinion***

I acknowledge your letter of February 3 in which you ask whether I would care to comment on a problem facing one of your member agencies which is concerned about the attitudes of the Juvenile Court in their community.

The problem seems to revolve around the strong feeling of the Juvenile Court in that community, that your member agency (which is permitted to do so by law) is thereby *obligated* to sign adult warrants charging neglecting parents, with whom I presume your member agency maintains social casework contact, with criminal neglect of their children.

I hardly know how to comment intelligently on this problem for the reason that so far as I know it simply doesn't exist in this community.

Adult cases involving criminal prosecution of parents who are allegedly neglecting their children come to the court, in the main, by five methods:

1. Referral by the State Department of Public Welfare with respect to a family with which the Department is maintaining social casework contact;
2. Referrals by the public or parochial school systems in similar cases;
3. Referrals by the police;
4. Occasional instances in which a neighbor complains; and
5. Referrals by our probation staff.

So far as I know, there is no reluctance on the part of any of our agencies to refer such a case to our Court, perhaps for the reason that all of these agencies know full well that while the objective of this Court is to secure compliance with the law, the Court has dedicated itself to the proposition that compliance with the law will be more reliably and

dependably secured through rehabilitative rather than punitive effort.

Hence all of these agencies trust the Court to work in conjunction with the referring agency toward attempting to alleviate the condition of the neglected child through caring, constructive probation, which consists of authoritative, rehabilitative casework, rather than through manipulative probation, which consists of threat, intimidation and punishment.

We are aware that our method will sometimes fail, but we are perfectly sure that if the rehabilitative method is ineffective in a given case, the punitive method will be even less effective as dependable long term help.

I suspect that the difficulty in the cited instance might be summed up as follows: (quoting from the inquiry)

"in the large majority of cases of neglect of children your member agency feels it should be regarded as a human social problem rather than criminal,"

and hence is not amenable to the process of an authoritative agency; while the Juvenile Court feels that criminal prosecution with its attendant threat of punishment is the proper authoritative way to handle the matter.

Our Court takes the view that authority need not necessarily, indeed should not be punitive; that, on the contrary, it should be attended with as much caring as is social casework.

The difficulty therefore seems to be a mutual lack of trust and confidence between, not only your member agency in the community mentioned, but likewise between the police department and the Court. This seems odd, indeed, since police methods are quite often associated in the public mind with punishment.

Perhaps you need a new set of Judges in the community mentioned: Judges who are able to conceive that there is no inconsistency between the social casework rehabilitative method and the proper use of caring authority. If the Judge understands and cares as much for the parents as he does for the children, and would be equally anxious to help the parents to build their lives anew, as he is to immediately alleviate the condition of neglected children, and if he has employed or has access to, and will trust a com-

petent probation staff, the problem would dissipate overnight.

Sub-section 4 of § 951, Chapter 9, Title 10, Delaware Code, having reference to the exclusive jurisdiction of the Family Court, reads as follows:

"For the prosecution and punishment of persons within a family charged with ill treatment, abuse, abandonment or neglect of children, or with contributing to their delinquency, neglect or dependency, or with any other offense, except felonies, against children;"

Under this Section our Court has no qualms about issuing its own adult warrants charging any of the violations mentioned in the sub-section, in any case in which any public or private agency or any member of our trained, capable, caring, supervised Probation Staff feels that such a warrant should be issued.

I doubt if these observations will be of much assistance. Change is hard even for "learning" persons and Judges steeped in the tradition that punishment is a sufficient deterrent for crime are not, generally speaking, especially noted as "learning" persons.

ELWOOD F. MELSON

*Judge of The Family Court, Wilmington, Del.*

## BOOK NOTES

### Psychiatric Inpatient Treatment of Children:

Report of the Conference on Inpatient Treatment of Children held in Washington, D. C. October 17-21, 1956, under the auspices of the American Psychiatric Association and the American Academy of Child Psychiatry, Washington: the American Psychiatric Association. 183 pp.

This book presents in substantive summary the thinking and discussions of the Conference on Inpatient Psychiatric Treatment for Children. It represents a year of advance planning, in addition to the meetings, and is based on descriptions of the operation of nineteen treatment centers directed by psychiatrists and qualifying as medical units. The conference agreed not to consider centers directed by other disciplines, such as social work.

The stated purpose of this report is to add to public understanding of treatment centers, to serve as a guide to organizations establishing new in-patient services, and to help strengthen existing services.

To accomplish this, the report seeks to set

minimum standards for good service. It reviews in detail the requirements for physical plant, board and community organization, staff requirements, treatment program components, and the need for continuing research.

Further, the pros and cons of the many theories and philosophies of therapy, now being tested in the nineteen centers, are presented. While the reader cannot fail to be impressed with the detailed analysis of the physical requirements of the plant, board organization and community relationships, some positions taken regarding staff and treatment might well be questioned by workers in the non-medical disciplines.

The conference holds that the director should be "a qualified child psychiatrist," and an able administrator as well as a clinician. He must be responsible for the establishment of the therapeutic milieu and able to mesh the two aspects of treatment, individual psychotherapy and milieu therapy, into an integrated treatment approach. It identifies the affective tone of the centers as the crucial element in staff integration.

The conference strongly emphasized that before the psychiatrist can achieve a therapeutic affective tone, the present weakness stemming from the difficulties of recruiting, training, keeping child care staff and defining their function, must be corrected.

However, in discussing in-service training and supervision of child care workers, it left this most important area to staff, who themselves occupied positions of relatively little status. Furthermore, it is disappointing that the importance of having a well-qualified social worker with broad, comprehensive experience in child care and group living, responsible for supervision, was not recognized.

The distance between the director and the group living staff seems too great to achieve the necessary quality of staff integration.

Beginning with the statement that "the Conference expressed the view that frankly to call a children's inpatient psychiatric treatment center a hospital or hospital unit—which it actually is—will contribute to the understanding and general use of the term *hospital* in relation to mental illness," the report emphasizes that all treatment centers must be medically oriented in every facet. It further states that half of the children studied were suffering from "transient situational personality disorders (adjustment



reaction)." In the majority of cases they came from broken homes where parents were unavailable either during the treatment or for after-care programming.

Thus, in its demand for an exclusively medical approach for even this category of children, hundreds of whom are being successfully treated at present in centers under social agency auspices, the conference will find itself in sharp conflict with those who believe many of these disturbed children do not need hospitals. There are those who believe that social agency treatment centers can be more community focused, can minimize the child's feelings of difference, can provide a greater variety of services with continuity of care and therapy, and at less

cost. Moreover, they can be more effectively geared towards maturation and the developmental aspects of child therapy.

It is perhaps in the chapter on research that the report makes its greatest contribution, for here is a thorough analysis of many of the problems requiring research, particularly in respect to milieu therapy.

The report will be of value to everyone in this field, for it makes a major contribution towards setting realizable standards in a new and challenging service. It should identify for the social work profession many areas of effort where the social scientist is crucially needed.

ANNA B. MAYER

*Consultant, Child Welfare League of America*

## CLASSIFIED PERSONNEL OPENINGS

Classified personnel advertisements are inserted at the rate of 15 cents per word; boxed ads at \$7.50 per inch; minimum insertion, \$3.00. Deadline for acceptance or cancellation of ads is eighth of month preceding month of publication. Ads listing box numbers or otherwise not identifying the agency are accepted only when accompanied by statement that person currently holding the job knows ad is being placed.

**ADOPTION CASEWORKER** in family agency with small adoption program. Experienced, with MSW. Salary range to \$5500, dependent on experience. Write Mrs. Ella H. Perkins, Executive Director, Family Service of Phoenix, 808 N. 2d Ave., Phoenix, Ariz.

**GROUP WORKER** for private cottage-type treatment institution, 55 children in residence from Los Angeles County. Responsibilities: member of social service team, plan and direct creative program of activities, supervise and train volunteers, carry limited number of special groups, supervise graduate students from University of Southern California (optional). Living in optional. Master's of group work necessary and experience desirable. Salary range \$4836-\$6750. F. J. Herring, Executive Director, 760 Mountain View St., Altadena, Calif.

**CASEWORKER II** in child placement agency. Service includes intensive casework with deeply troubled parents and children. Psychiatric consultation. Excellent personnel practices, Social Security, retirement, and health insurance. Requirements: Master's degree social work school and potential of being creative. Salary \$4572-\$5712. Clyde S. Pritchard, Executive Secretary, Children's Bureau of Los Angeles, 2824 Hyans St., Los Angeles 26, Calif.

**The League operates a limited vocational service for supervisors and executives interested in a position in the Children's field.**

**LOS ANGELES—CASEWORKERS II and III (2)** in parent-child guidance service to families with troubled boys between the ages of 6-18; psychiatric and psychological consultation available. Requirements: Master's degree social work school; Grade III, 5 years' experience following graduation preferred. Salary, Grade II—\$4836-\$6036; Grade III—\$5400-\$6756; five-step plan. Social Security and retirement health insurance paid by agency. CWLA member. Milton L. Goldberg, Executive Director, Jewish Big Brothers Association, Room 366, 590 N. Vermont Ave., Los Angeles 4, Calif.

**LOS ANGELES—Openings for two caseworkers with graduate training in expanding family and child welfare agency—multiple services including marital counseling, unmarried parents, financial assistance, child placement in foster home care and group care, psychiatric consultation. Highly qualified supervision. Standard personnel practices. Opportunities for advancement. Salary \$4572-\$6384 depending on training and experience. Write: Rev. William J. Barry, Assistant Director, Catholic Welfare Bureau, 855 S. Figueroa St., Los Angeles 17, Calif.**

**SENIOR GROUP WORKER** for small residential treatment program serving emotionally disturbed boys and girls ages 6-14. Interracial and nonsectarian. CWLA member. Psychiatric consultation, good employment practices. Salary range, \$4836-\$6756. Starting salary dependent on qualifications. Position not newly created. Professional training and experience with children required, institutional experience desirable. Write to Maxine Elliott, Director, Hathaway Home for Children, 840 North Ave. 66, Los Angeles 42, Calif.

**CASEWORKER** for small residential program, interracial and nonsectarian. Agency developing foster home program as extension of treatment. CWLA member. Psychiatric consultation, good employment practices. Salary range \$5400-\$6900. Starting salary dependent on qualifications. Master's degree required, as well as experience in treatment of emotionally disturbed children. Foster homefinding experience desirable. Write Maxine Elliott, Director, Hathaway Home for Children, 840 North Avenue 66, Los Angeles 42, Calif.

**CASEWORKERS:** 2 Social Worker V positions open in Child Welfare Services, 1 in adoption unit, salary \$439-\$549. Master's degree in social work from accredited school essential. Applicants will be interviewed at Regional Child Welfare Conference in Los Angeles in March. Write: Harold E. Simmons, Superintendent, Social Service Division, 225-37th Ave., San Mateo, Calif.

**CASEWORKER**, woman, for small residential program for adolescent girls. MSW required, experience in treatment of emotionally disturbed children desirable. CWLA member, psychiatric consultation, good employment practices. Salary \$5400-\$6756, starting salary dependent on qualifications. Write Ella K. Reese, Director, Rosemary Cottage, 3244 E. Green St., Pasadena, Calif.

**SAN FRANCISCO** City and County Public Welfare Department openings: social service worker, \$370-\$430 per month, 1 year's graduate work or university education and 1 year's experience. Child welfare worker, \$390-\$470 per month, 2 years' graduate work or 1 year's graduate work and 2 years' experience. Progressive department providing adoption, child placement, counseling and protective services. Psychiatric consultation. For information and applications write at once: Civil Service Commission, Room 151, City Hall, San Francisco 2, Calif.

**CASEWORKER**, MSW. Private child welfare agency offering social services to Protestant children in treatment-oriented institution, developing foster home program and services to children in own homes. Psychiatric and psychological consultation; high standards of practice and supervision; generous personnel practices; Social Security, national health and welfare retirement, medical insurance. Salary range \$4000-\$5700. Starting salary dependent on qualifications. Excellent opportunity for professional development. Provisional member CWLA. Donald D. Dowling, Executive Director, Edgewood, 1801 Vicente St., San Francisco 16, Calif.

**CHILD WELFARE SERVICES WORKERS** for fast-growing southern California county. \$4884-\$5796. Highly qualified, professional supervision. Opportunities in adoption field included. One year's graduate work required. Health insurance, paid vacation, sick leave, other benefits. County Personnel, 236 Third St., San Bernardino, Calif.

**SAN FRANCISCO, CALIFORNIA:** openings for professionally trained family and child welfare caseworkers in large, multiple-function agency with professional staff of 56. Grade I to \$5592; Grade II to \$6192; Grade III to \$7236. For further information and description of grade qualifications write: Executive Director, Catholic Social Service of San Francisco, 1825 Mission St., San Francisco 3, Calif.

**CASEWORKERS** in private, nonsectarian, statewide, multiple-function agency. Small case loads, excellent supervision, student training program, psychiatric consultation. Openings in newly established protective service unit and in child placing. Social Security and retirement. Requirements: Master's degree social work. Salary \$4500-\$6600. Initial salary based on qualifications. C. Rollin Zane, Executive Director, Children's Services of Connecticut, 1680 Albany Ave., Hartford 5, Conn.

**CASEWORKER**, Master's degree. Work in coordination with other professional disciplines in residential treatment center for emotionally disturbed children. Part of total agency work that includes adoption, foster home, protective and family services. Supervision and psychiatric consultation integral part of total treatment program. Excellent personnel practices. Salary range \$4500-\$6600, starting salary dependent on experience. Miss Ruth H. Atchley, Resident Director, Children's Village, Children's Services of Connecticut, 1680 Albany Ave., Hartford 5, Conn.

**CASEWORKER** in family and children's agency, providing family case-work, child welfare services, foster home placement, and adoption. Good personnel practices. Requirements: MSW. Salary \$4260-\$5820. Social Security and retirement. Rev. Joseph P. Rewinkel, Associate Director, Diocesan Bureau of Social Service, 259 Main St., New Britain, Conn.

**CASEWORKERS**—man and woman with MSW in newly organized child care agency offering institutional and foster home program, adoptions, and services to unmarried mothers. Can appoint at salary commensurate with experience from \$4500-\$6000. Excellent personnel practices including Social Security and national retirement plan. Write Executive Director, Bethesda-Savannah Children's Center, 615 E. Broughton St., Savannah, Ga.

**CASEWORKER** in family-children's service agency providing family case-work, specialized services to unmarried mothers, child placement and adoption. Salary comparable with good practice. Social Security and retirement. Write Miss Jane K. Dewell, Executive Secretary, Catholic Social Service Bureau, 478 Orange St., New Haven, Conn.

**CASEWORKER** in multiple-function, private, nonsectarian, child welfare agency. Case load of emotionally disturbed children in institutional setting. Psychiatric consultation. Good personnel practices. Top salary limit \$5600. Minimum requirement: two years' graduate social work training. Complete details by writing Anna K. Buell, Casework Supervisor, Children's Center, 1400 Whitney Ave., New Haven, Conn.

**CASEWORKER** (1), graduate training, for small Catholic agency within commuting distance of New York City. Immediate opening. Multiple services. Salary range \$4500-\$5000 dependent on experience. Retirement and regular increments. Psychiatric consultation available. Apply Miss Mary C. Coughlin, Executive Secretary, Catholic Charities, 78 Elm St., Stamford, Conn.

**MIAMI, FLORIDA.** Young, rapidly expanding community in tropical climate offers ground-floor opportunities. Caseworkers needed for small agency providing services to unmarried mothers, family counseling, foster home care, and adoptive placement. Master's degree required. Salary range: \$4000-\$6000. Social Security. Write Rev. Bryan O. Walsh, Catholic Charities Bureau, Inc., 395 N.W. First St., Room 207, Miami 36, Fla.

**SPECIALIZED GROUP CARE FACILITY**, heavily endowed, needs imaginative, creative, resourceful person to help develop treatment services. Capacity 25 children. Co-ordinated program with Child and Family Service (CWLA, FSAA); psychiatric consultation. Located in pleasant residential section of large attractive university city in Illinois river valley. 150 miles from Chicago. MSW is minimum requirement. Salary open to negotiation. "Living in" not expected. You will be working with: Konrad Reisner, MA, Bryn Mawr College School of Social Work, Executive Director; Walter P. S. Chun, MSW, University of Michigan, Superintendent; Miss Mary M. Caven, MSW, University of Pennsylvania, Casework Supervisor. Konrad Reisner, Executive Director, Children's Home, 2130 N. Knoxville Ave., Peoria, Ill.

**MIAMI—OPPORTUNITY FOR YOUNG CASEWORKER** in interracial, nonsectarian child-placement agency offering foster care and adoption services. Requirements: Master's degree social work school. Previous experience unnecessary. Interest in treatment of disturbed children an asset. Psychiatric consultation available. Salary scale \$4000-\$6000. Appointment salary dependent on experience. Write Mrs. Margaret Harnett, Executive Director, Children's Service Bureau, 395 N. W. First St., Miami, Fla.

**FAMILY SERVICE OF SAVANNAH.** Homemaker Supervisor to supervise 4 homemakers and carry some counseling cases. Minimum requirements—professional degree and 2 years' successful experience in casework agency. Salary \$5140-\$6100, based on experience. Caseworker to work with family problems existing in environment or relationships, minimum requirement professional degree in social work. Salary \$4500-\$6100, based on experience. Address inquiries to Miss Marguerite M. Munro, Executive Director, 119 Habersham St., Savannah, Ga.

**SUPERVISOR and CASEWORKERS** for child welfare services including counseling, foster care, adoption, and homemaker program. CWLA and FSAA member. Supervisor salary \$6000-\$8000; caseworker salary \$4600-\$6500. Can appoint above minimum depending on qualifications. Minimum requirements: for caseworkers, MSW; for supervisor, MSW plus supervisory experience and ability to administer department. Social Security and retirement. Write Leon D. Fisher, Executive Secretary, Family and Children's Service of Ft. Wayne, Inc., 2430 Fairfield Ave., Ft. Wayne, Ind.

**CASEWORKERS (2), 1** for adoption, 1 for undifferentiated case load. Voluntary, statewide, nonsectarian agency. CWLA member. Foster home, group home, institutional placement; unwed parents; adoption. Expansion 1958 requires additional staff. MSW required. Adoption job requires some travel. Iowa Children's Home Society, 2203 Grand Ave., Des Moines, Iowa.

**CASEWORKERS (2)—1** for adoption and 1 for diversified case load in private nonsectarian agency. Psychiatric consultation; good personnel practices; student training program; Social Security and retirement; salary dependent on training and experience. Apply Children's Agency, 320 E. Gray St., Louisville, Ky.

**CATHOLIC AGENCY** offering services to families and children has positions available in various casework job classifications. Possible salary range to \$6400 depending on qualifications. Progressive personnel practices, agency consultation service from related professional disciplines. Apply Catholic Social Services of Wayne County, 9851 Hamilton Ave., Detroit 2, Mich.

#### Methodist Children's Home Society Detroit, Michigan

**DIRECTOR OF CASEWORK SERVICES** for child welfare agency providing adoption and unmarried mothers services, supervised foster home care, and residential group care (in Children's Village). Professional staff includes 2 casework supervisors, 9 caseworkers, 2 group workers, teacher, and psychiatric consultant. Responsibilities include over-all planning, coordination and direction of social services. Master's degree and appropriate experience required. CWLA member agency deeply interested in providing high quality of service. Salary range \$6200-\$7900; starting salary dependent on experience.

**CASEWORK SUPERVISOR** for adoption department, 5 caseworkers for adoption and unmarried mother work. Student unit. Master's degree and supervisory experience in adoptions required. Salary range \$5550-\$7050; starting salary dependent on experience.

**CASEWORKERS** with Master's degree for adoption department. Salary range \$4550-\$6150. Good personnel and professional standards; psychiatric consultation and congenial staff. Salary commensurate with experience. Apply to Clayton E. Nordstrom, Executive Director, Methodist Children's Home Society, 26645 W. Six Mile Rd., Detroit 19, Mich.

**CATHOLIC CASEWORKER** to fill position jointly sponsored by Catholic Service Bureau and Family Service Society. Can appoint at \$4790. Family counseling and child welfare case load. Retirement plan, Social Security, and other benefits. Ideal location in heart of vacation area. Write Albert G. Dietrich, Director, Family Service Society, 9 Broad St., Bangor, Me.

**CASEWORKER**, in protective division of multiple-service agency, to meet increasing demands. Challenging opportunity. Excellent supervision, psychiatric consultation. Salary range \$4000-\$5400. Family and Children's Society, 204 W. Lanvale St., Baltimore 17, Md.

**CASEWORKER** in small child care agency. Requirements: Master's degree social work school, preferably with experience in foster home and adoption services. Salary \$4000-\$4800. Can appoint at \$4400 if qualifications warrant. F. Reid Isaac, Executive Director, Board of Child Care, Baltimore Annual Conference Methodist Church, 516 N. Charles St., Baltimore 1, Md.

**DISTRICT SUPERVISOR**, nonsectarian, statewide agency providing services for unmarried mothers, foster care, adoption and services to children in own homes. Salary \$5400-\$6600. Starting level dependent on experience. Master's degree social work required; child welfare and supervisory experience preferred. Opportunity to work with lay committees and community groups. Miss E. Elizabeth Glover, Executive Director, Maryland Children's Aid Society, Inc., 5-7 W. 29th St., Baltimore 18, Md.

**CASEWORKER**, woman, in nonsectarian children's agency offering foster home care, group placements, and adoption services. CWLA member. Requirements: MSS or 1 year's graduate work plus experience. Salary commensurate with training and experience. Social Security and retirement plan. Write Miss Eileen G. Meany, General Secretary, The Avon Home, 53 Church St., Cambridge 38, Mass.

**NEW CASEWORK POSITION**, new agency in fascinating community. Family and children's agency recently merged and with strong community support needs capable casework supervisor with MA and experience in family and children's fields; psychiatric consultation available. Starting salary \$6000; Social Security and retirement. Carroll Marchand, Executive Director, Family and Children Service of Berkshire County, Inc., Box 133, Pittsfield, Mass.



**PROGRESSIVE CWLA MEMBER AGENCY** has vacancies created by new position and promotion from within. Salary range \$4500-\$6500 for graduate worker. Weighted case loads of unmarried parents, adoptive applicants, and foster care offer wide variety of experience. Opportunity to participate in agency planning, experimentation public relations, field work training program for M.S.U., added advantages of being in Michigan's capital city. Sound personnel practices, health and welfare retirement plan, Blue Cross and Social Security. Adequate yearly increments; interested, active board. Contact Clinton Justice, Executive Secretary, Michigan Children's Aid Society, 615 N. Capitol, Lansing, Mich.

**CASEWORK SUPERVISOR** for residential group care (Children's Village) and foster family care services. Cottage plan has small living groups. Agency has good resources and good professional staff, student training, excellent personnel practices. Real opportunity to develop casework services in program which recognizes the need for therapeutic group living and individual treatment. Apply Clayton E. Nordstrom, Executive Director, Methodist Children's Home Society, 26645 W. Six Mile Rd., Detroit 19, Mich.

**CASEWORKER**, private, nonsectarian children's placement agency with boarding home, adoption and unmarried mother services. MSW required. Salary range \$4400-\$6100. National retirement and Social Security. CWLA member. For information write Stanley L. Venner, Executive Secretary, Michigan Children's Aid Society, Flint Branch, 200 E. Kearsley St., Flint 2, Mich.

**CASEWORKER** for private nonsectarian foster home placement agency. MSW desired. Salary range \$4900-\$6400. Opportunity for supervisory experience for qualified worker. CWLA member. Social Security and retirement plan. D. A. Blodgett Home for Children, 805 Leonard St. N.E., Grand Rapids, Mich.

**CASEWORKER**, skilled, for children's services, to work with children and their parents in foster homes and own homes where children have adjustment problems. Salary range \$4724-\$6421, related to experience on basis of 5% increase for each year's experience up to 3 years. Can appoint at \$5419. Dr. C. Wilson Anderson, Executive Director, Family and Children's Service, 214 Citizens Aid Building, 404 S. 8th St., Minneapolis 4, Minn.

**CASEWORKER**, intake for homemaker service; service to children, older persons, and chronically ill, in multiple-function agency employing 25 homemakers. Psychiatric consultation available. Master's degree required. Salary range \$4725-\$6680. Can appoint experienced worker at \$5176. For further information write Mrs. Tracy C. Clough, Supervisor of Homemaker Service, Family and Children's Service, 404 S. 8th St., Minneapolis 4, Minn.

#### Caseworkers—MSSW

Multiple service agency with practice diagnostically centered. Active, full staff development program. Personnel practices include retirement, Social Security, other benefits. Current salary — \$4000-\$6200. Appointment on scale commensurate with experience. Write Curtis E. Coe, Family & Child Service, 1504 Dodge St., Omaha 2, Nebr.

**SENIOR CASEWORKER** for progressive, multi-function children's agency with small institutional program. Room for growth and development. Master's degree required, experience preferred. Position open summer 1958. Write Marshall S. Bier, Administrative Director, Muskegon Children's Home, 1352 Terrace St., Muskegon, Mich.

**TRAINED PARENT-CHILD COUNSELOR** and placement worker. Some direct therapy of children with psychoanalytic consultation. Appointment from \$6000 up. Beautiful city of inland lakes and active cultural life. Write Callman Rawley, Jewish Family & Children's Service, 404 S. 8th St., Minneapolis 4, Minn.

**CASEWORKER** in program of specialized foster care, service to unmarried mothers, and adoption. Opportunity about to develop for specialization in adoption service. Seminars; consultation with and participation in multi-disciplined diagnostic and treatment team of staff. Professional school graduates without experience now start at \$4400; range under constant review. Agency planning, in consultation with FSAA and in affiliation with regional citizen group, to establish demonstration unit of family service in 1958 in uncovered area of state. Write Mrs. Jeanette H. Melton, N. H. Children's Aid Society, 170 Lowell St., Manchester, N. H.

**SOCIAL WORK OPENINGS** rapidly expanding State Welfare Department. Vacancies exist for Child Welfare Consultant, \$487-\$587; Field Representative, \$487-\$587 (headquarters, Reno); Social Casework Supervisor, \$421-\$511 (Reno, Las Vegas); Principal Public Welfare Worker, \$421-\$511 (Elko, Fallon); Senior Child Welfare Worker, \$382-\$464 (Las Vegas). Graduate work required, with some substitution for experience. Residence waived. U.S. citizenship required. For particulars write Nevada State Welfare Department, Box 1330, Reno, Nev.

**CASEWORK SUPERVISOR** for child care agency with institutional and foster home service, to supervise 3-4 workers and handle intake. Agency in process of expansion with some reorganization of the social service department planned. New supervisor with ability to participate in formulation of new policies and procedures as well as in further development of growing agency in rapidly growing area. Salary range \$5150-\$6850; retirement fund and hospitalization. Ernest Hirschbach, Executive Director, Camden Home for Children, 915 Haddon Ave. Camden 3, N. J.

**WONDERFUL OPPORTUNITY** for worker with adoption experience in largest adoption agency in state. Program expanding especially in placement of Negro children for adoption. Requires Master's degree. Salary based on experience and evaluation of work. Located 1 hour from New York City. Write Miss Virginia van Hoogenstyn, Executive Director, Children's Aid and Adoption Society, 439 Main St., Orange, N. J.

**CASEWORKER** multiple-function agency. Case load married mothers, protective Good person. Salary range \$4200-\$5200. Experience. Located 1 hour from New York City. Write Miss Executive and Adoption, Orange, N. J.

**CASEWORKER** trained for program. Process. Reading education. Psychiatric consultation. Salary commensurate. CWLA member. Write Mary G. Tilton, 412 Herkin...

**CASEWORKER** dental group. Opportunity for through education. Program. Appoint aments: M institution. Write: P. Protestants. Niagara S...

**CASEWORKER** trained, for providing care. Qualificatric cons program. depending Evelyn M Service, Hills, N.

**DAY CARE** American and/or experience work, inc administration centers; work pra and con teaching command \$6500, pl \$5-\$6 per Transpor and for h Write He utive As Joint 3 East 54



**CASEWORKER** in nonsectarian, multiple-function child welfare agency. Case load of counseling to unmarried mothers, foster home care, protective service, and adoption. Good personnel practices. Salary range \$4200-\$5800 depending on experience. Minimum requirement 2 years' graduate social work training. Located 1 hour from New York City. Write Miss Vinnie van Hoogenstyn, Executive Director, Children's Aid and Adoption Society, 439 Main St., Orange, N. J.

**CASEWORKERS**, professionally trained for foster home placement program. Plans for expanding in process. Program includes remedial reading education, psychological and psychiatric services. Experience desirable but not essential. Good personnel practices. Social Security. Salary commensurate with experience. CWLA member. Write Miss Mary G. Arnold, THE SALVATION ARMY Foster Home Service, 412 Herkimer St., Brooklyn 13, N. Y.

**CASEWORKERS** in private residential group care facility. Opportunity for advancement and growth through development of casework program. Salary \$4200-\$6000, can appoint above minimum. Requirements: Master's degree social work, institutional experience desirable. Write: Phil H. Tindall, Director, Protestant Home for Children, 605 Niagara St., Buffalo 1, N. Y.

**CASEWORKERS**, professionally trained, for child placement agency providing foster home and group care. Qualified supervision, psychiatric consultation, student training program. Salary range \$4200-\$5700 depending on experience. Write Miss Evelyn M. Mowitz, Director Social Service, 67-35 112th St., Forest Hills, N. Y.

**DAY CARE CONSULTANT**, American training in nursery school and/or early childhood education; experience in nursery or day care work, including experience in administration or supervision of day care centers; ability to supervise field work practice of student teachers and conduct classes in day care teaching methods and skills; fair command of French. Jewish background preferred. Salary \$5000-\$6500, plus living-cost allowance of \$5-\$6 per day depending on country. Transportation paid to duty stations and for home leave every 18 months. Write Henrietta K. Buchman, Executive Assistant, American Jewish Joint Distribution Committee, 3 East 54th St., New York 22, N. Y.

**CASEWORKERS** for stimulating program of child care, including work with children in their own homes through counseling and homemaker service, and with children in foster homes. Excellent supervision, psychiatric teaching and good opportunity for professional growth. Write Miss Ava F. Collingwood, Director of Casework Program, The Children's Aid Society, 150 E. 45 St., New York 17, N. Y.

**SUPERVISOR**, experienced in foster home work, for children's agency offering multiple services of counseling, homemaker service, foster homes and cottage care. Opportunity to assist with in-service training program. Write Miss Ava F. Collingwood, Director of Casework Program, The Children's Aid Society, 150 E. 45 St., New York 17, N. Y.

**ADVANCED CASEWORKER** for expanding homemaker service program. Write Miss Wilma Wilcox, Director of Homemaker Service, The Children's Aid Society, 150 E. 45 St., New York 17, N. Y.

**CASEWORKER**, fully trained, experience preferred. Group care, foster home and adoption placement, services to unmarried mothers. New York City area only. Excellent consultation. Caseworker salary range \$4400-\$6450. Present professional staff of 9. Lutheran Child Welfare Association, 422 W. 44 St., New York 36, N. Y. Arnold H. Bringer, Executive Secretary.

**CHALLENGING OPPORTUNITY** for professionally qualified, experienced foster home worker to set up and operate aftercare foster home program in Catholic cottage plan institution for delinquent boys; institution conducted by Christian Brothers, located in upper Westchester County, 50 miles north of N.Y.C.; strong and expanding clinically oriented treatment staff. Write: Raymond F. Scannell, Administrative Supervisor, Social Service Department, 122 E. 22nd St., New York 10, N. Y.

**INSTITUTIONAL DIRECTORS** and house parents. We specialize in the placement of administrative personnel for child care institutions. GERTRUDE R. STEIN, INC., Vocational Service Agency, 64 W. 48 St., New York City.

**NURSERY SCHOOL DIRECTOR**, position available on or about June 15. Community Chest agency. High standards. Graduate professional training and experience required. Starting salary: \$4700-\$6000. Irving M. Kriegsfeld, Executive Director, The Baden Street Settlement, Inc., 152 Baden St., Rochester, N. Y.

**CASEWORKER** in residential school for emotionally disturbed adolescent girls. Good supervision, psychiatric consultation, psychological testing. Salary about \$5000, depending on experience and professional training. Apply to Sister Mary Paul, Psychiatric Social Worker, Guardian Angel School, 1225 Peoples Ave., Troy, N. Y.

**CASEWORK CONSULTANT**, position available on or before April 1st. Community Chest supported multiple-function agency. Program includes health center, nursery school, group work department and counseling service. Graduate professional training required. Experience in medical social work or child welfare essential. Starting salary: \$4000-\$5500. Irving M. Kriegsfeld, Executive Director, The Baden Street Settlement, Inc., 152 Baden St., Rochester, N. Y.

**CASEWORKER**, professionally trained, for progressive Catholic family and children's agency, CWLA member. Student affiliations with Western Reserve University and Catholic University of America. Regular psychiatric consultation. Diversified case load and strong supervision. Good personnel practices. Salary range, \$4200-\$6100. Write John Kelleher, Executive Secretary, Catholic Service League, 138 Fir Hill, Akron 4, Ohio.

**DIRECTOR OF CASEWORK** in progressive Catholic family and children's agency. CWLA member. Student training program for School of Applied Social Sciences of Western Reserve University and Catholic University of America. Regular psychiatric consultation. Professionally trained staff. Excellent salary and personnel practices. Requirements: MSW and supervisory experience. Write John Kelleher, Executive Secretary, Catholic Service League, 138 Fir Hill, Akron 4, Ohio.

**CASEWORKER**, man or woman for established institution serving 45 school-age children. Board ready to strengthen and expand present program for emotionally disturbed children and to build cottage units. Requirements: Master's degree social work and minimum of 3 years' experience in family and child welfare. Can appoint at \$6500, with other benefits. Write Mrs. Roy Ware Littler, The Jones Home, 3518 W. 25th St., Cleveland, Ohio.

**CASEWORKER (1) AND SUPERVISOR (1)**—Are you interested in professional growth in agency with vision, new horizons in adoption policies, opportunities to participate in making policies? Life in mild climate, lovely Piedmont Carolina country. Responsibilities can combine skilled casework with unmarried mothers, infants, school-age children, and adoption homefinding. Statewide, nonsectarian voluntary agency 55 years old. Requirements for casework position at least 1 year graduate study. Supervisor must have 2 years graduate study. Salary range for caseworker, \$4200-\$5000; for supervisor, \$5200-\$6000. Appointment salaries for both positions dependent on qualifications. Write Miss Harriet L. Tynes, Executive Director, Children's Home Society of North Carolina, Greensboro, N. C.

**CASEWORKER** for maternity home and hospital giving group and out-patient care to unmarried mothers. Medical, casework and group work program. Psychiatric consultation available. Excellent supervision. Master's degree accredited social work school desired; or, graduate training with experience in adoption, unmarried mother, or family casework agency. Salary range \$4300-\$5000 commensurate with experience and training; 4 weeks' paid vacation; annual increments; noon meal provided; sick leave and Blue Cross-Blue Shield benefits. Evelyn C. Skinner, Administrator, Catherine Booth Home and Hospital, 836 Beecher St., Cincinnati 6, Ohio.

**ADOPTION SERVICE** — Caseworker in family and children's agency. Good personnel policies, psychiatric consultation, student training, retirement plan. Salary range up to \$6500. New, modern air-conditioned offices. Write Howard Hush, Family and Children's Service Association, 184 Salem Ave., Room 120, Dayton 6, Ohio.

**CASEWORKER.** Congregate institution for 40 school-age children wants mature, experienced caseworker to develop program now carried by two child-placing agencies. Salary \$4000-\$5000. Write Ruth M. Bonsteel, Executive Director, Wiley House, 1650 Broadway, Bethlehem, Pa.

**CASEWORKER** for nonsectarian institution serving moderately disturbed school-age children. Opportunity for advancement as program expands. Requirements: Master's degree social work plus experience. Salary \$5000 and up. Write Leonard Yaffe, Executive Director, Children's Home of Easton, 25th and Lehigh Drive, Easton, Pa.

**SUPERVISOR** of workers in private nonsectarian children's agency. Service to unmarried mothers, foster care, adoption services. Master's degree and supervisory experience. Salary based on qualifications; can appoint at \$5600. Less than 3 hours travel time New York and Philadelphia. Miss Eleanor Costello, Executive Secretary, Children's Aid Society of Lehigh County, 451 Hamilton St., Allentown, Pa.

**CASEWORKER** in private agency offering social services to children in their own homes, foster homes, institutions, and day care; and to their parents. Student training program, opportunities for staff development. Agency located in college town, 2 hours from N.Y.C. and Philadelphia. Social Security, retirement, and sound personnel practice. Can appoint within \$4000-\$5000 range according to qualifications. Mary Lee Schuster, Executive Director, Northampton County Children's Aid Society, 48 N. 4th St., Easton, Pa.

**CASEWORKER**, institution for delinquent boys. Casework with boys between 8-16 years. Required: MSW. Partially trained workers considered. \$4300-\$5200. Can appoint within range. Noon meal provided. Windell W. Fewell, Superintendent, The Glen Mills Schools, Glen Mills, Pa.

**COUNSELOR** for private boys' school for 1100 students. Provide individual counseling for boys and their families as well as interpretation to staff, teachers and house-parents. Requirements: man with Master's degree and experience with children in social work or clinical psychology setting. Beautiful small community with active cultural life and excellent schools. Salary commensurate with qualifications plus above average fringe benefits. Write to E. Glenn Rogers, Director of Enrollment and Social Services, Milton Hershey School, Hershey, Pa.

**CASEWORKERS:** (1) Carry small case load which permits thoughtful, creative work with children in foster homes, services to children, parents, foster parents; excellent supervision and psychiatric consultation. Agency developing expanding range of specialized homes. (2) Homefinding department, including promotional work in community, studies of applicants, close collaboration with other agency services. Master's degree; salary \$4300-\$5700. Joseph L. Taylor, Executive Director, Association for Jewish Children, 1301 Spencer St., Philadelphia 41, Pa.

**CASEWORK SUPERVISOR**, institution for delinquent boys, to supervise 5 caseworkers working with boys between 8-16 years. \$5520-\$6420. Can appoint within range. Noon meal provided. Windell W. Fewell, Superintendent, The Glen Mills Schools, Glen Mills, Pa.

**CASEWORKERS** for children's agency giving counseling to unwed mothers, foster care and adoption services. Excellent supervision, psychiatric consultation, student training program. MSW required; \$4500-\$6500, starting salary based on experience. Dr. Elizabeth A. Lawder, Executive Director, Children's Aid Society of Pennsylvania, 311 S. Juniper St., Philadelphia 7, Pa.

**CASEWORKERS** for agency giving group care to unmarried mothers. Medical and psychiatric consultation, casework and group work program. Excellent supervision. MSW required. \$4500-\$5600, starting salary based on experience. Mary Lynch Crockett, Director, Florence Crittenton Home of Philadelphia, 6325 Burbridge St., Philadelphia 44, Pa.

**CASEWORKER** to do intensive work with girls in residential treatment setting. Psychiatric consultation. Small case loads, good supervision and personnel practices. Requirements: MSW, experience preferred; must like adolescents. Salary based on experience; minimum \$4300. Miss Dorothy Fritz, Executive Director, Youth Service, Inc., 410 N. 34th St., Philadelphia 4, Pa.

**CASEWORKERS** in agency offering family casework, homemaker service, child placement, and adoption. Supervision adapted to experience, staff study groups, psychiatric consultation, a challenging research program. Requirements: MSW, experience in family or child welfare desirable. Salary range \$4200-\$6400. Appointment salary based on qualifications. Social Security and retirement. Write Mary Ellen Hoffman, Director of Casework, Family and Childrens Service, 808 House Bldg., Pittsburgh 22, Pa.

**CASEWORKER** with MSW and practical experience in children's field for developing new social casework program in well-established children's home. Some supervisory work included. Salary \$4400 minimum plus complete maintenance if desired. Beautiful surroundings in country near Reading, Pa. Challenging and varied work with opportunities to develop new program. Psychiatric consultations available. Write the Rev. Garnet Adams, Superintendent, Bethany Home, Womelsdorf, Pa.

**CHALLENGING** availability to children's workers in to children's consultation to and special schools and Health, Department operating search project in coordination with social workers. Position school social administrator demonstration of social Personnel facilities. degree, accreditation plus minimum experience. experience supervision on qualification for 10 months further information Supervisor der Public

**CASEWORKER** residential emotionally distressed their parents. Supervisory small caseloads collaborate with tramural psychiatric personnel practice and 4 years to \$6000. able for family work. Executive Director, Home, Inc., Burlington

**CASEWORKER** male in supported foster home and parent Psychiatric Beginning with Master's Richmond 1820 Mon Va.

**SUPERVISOR** children's Welfare year graduate child welfare Salary \$5000 qualifications State Personnel Administration Wash.

**CHALLENGING OPPORTUNITY** available now for social caseworkers in school casework services to children and their families; consultation to teachers, administrators, and special service personnel. Public schools and Division of Mental Health, Department of Health, cooperating in demonstration and research project developing teamwork in coordinated Pupil Personnel Services. Positive inter-discipline (counselors, nurses, speech improvement, school social workers, teachers, administrators) relationships. Also demonstration and research service of social caseworker within Pupil Personnel Services. Superior school facilities. Requirements: Master's degree, accredited social work school, plus minimum of 3 years' qualifying experience. School or child guidance experience preferred. Experience in supervision desirable. Salary based on qualifications, minimum \$6000 for 10 months. Please write for further information to Ila Fern Warren, Supervisor, Visiting Teachers, Snyder Public Schools, Snyder, Tex.

**CASEWORK SUPERVISOR**, small residential treatment program for emotionally disturbed children and their parents. University community. Supervise professional staff, carry small intensive case load, collaborate with houseparents and intramural school teachers. Weekly psychiatric consultation, good personnel practices. Minimum, MSW and 4 years' experience. Can appoint to \$6000. Modern apartment available for family if desired. Meals during work hours. Richard M. Smith, Executive Director, The Children's Home, Inc., 555 Shelburne Rd., Burlington, Vt.

**CASEWORKERS (2)**, male and female in private community chest supported agency placing children in foster homes, counseling children and parents in their own homes. Psychiatric consultation available. Beginning salary \$4000 for worker with Master's degree in social work. Richmond Children's Aid Society, 1820 Monument Ave., Richmond, Va.

**SUPERVISOR**, Social Services II, children's unit, Seattle office, State Welfare Department. Requires 1 year graduate training and 2 years' child welfare supervisory experience. Salary \$5184-\$5652 depending on qualifications. Write Washington State Personnel Board, 212 General Administration Building, Olympia, Wash.

**CHILD WELFARE SUPERVISOR**—1 chief, \$5112-\$6144; requirements, 2 years' social work school and 2 years' child welfare experience, or 1 year's training and 4 years' child welfare experience. One assistant supervisor, \$4464-\$5364; requirements, 1½ years' training and 1 year's child welfare experience, or half year's training and 3 years' child welfare experience. Progressive agency; fast growing community; psychiatric consultation; personnel policies; retirement plan; excellent opportunities for community relationships. Write Social Service Bureau, Department Public Welfare, 514 E. Plume St., Norfolk, Va.

**CHILD WELFARE SUPERVISORS**, 3 openings in state welfare department. Requires 1 year graduate training and 3 years' children's casework experience, 1 year of which must have been advanced casework or supervision. Salary \$4368-\$4968 depending on assignment and qualifications. Write Washington State Personnel Board, 212 General Administration Building, Olympia, Wash.

**CHILDREN'S CASEWORKERS**, openings available in rural and urban areas of the Evergreen State. Requires 1 year graduate training and 1 year children's casework experience. Salary \$4008-\$4368 depending on qualifications. Write Washington State Personnel Board, 212 General Administration Building, Olympia, Wash.

**PSYCHIATRIC SOCIAL WORKERS** for expanding program. Five new positions in juvenile correctional institutions. Requires 2 years' graduate study with psychiatric sequence or field placement offering psychiatric services preferred and 1 year clinical psychiatric casework experience. Starting salary \$4764-\$5184 depending on qualifications. Contact Washington State Personnel Board, 212 General Administration Building, Olympia, Wash.

**SOCIAL SERVICE FIELD REPRESENTATIVE**, state school for mentally retarded. Duties include admission, casework, and placement of students. Requires 2 years' graduate study and 1 year's experience in children's services agency. Starting salary \$4560-\$4968 depending on qualifications. Contact Washington State Personnel Board, 212 General Administration Building, Olympia, Wash.

**SOCIAL WORKER**, Master's degree, to work in child welfare agency. Experience unnecessary. Minimum beginning salary \$4800. Write Catholic Welfare Bureau, Diocese of Madison, 119 E. Washington Ave., Madison, Wisc.

**SUPERVISORY OPENINGS** for Child Guidance Centers. Supervisors require 3 years' and Assistant Supervisors 2 years' experience in clinical psychiatric casework; both positions require 2 years' graduate study with psychiatric sequence or field placement offering psychiatric services preferred. Starting salaries \$6188-\$6732 and \$5412-\$5904, depending on qualifications. Contact Washington State Personnel Board, 212 General Administration Building, Olympia, Wash.

**CASEWORKER**: Broaden your skills in casework with children in group care, unwed mothers, and adoptive applicants. Advancement to more responsible position may be expected. New home, reasonable rent, available in medium-sized college community; access to fishing, hunting, and winter sports. MSW required. Salary \$4704 with annual increments. Spencer H. Crookes, State Director, Washington Children's Home Society, P. O. Box 90, University Station, Seattle 5, Wash.

**CHILD WELFARE SUPERVISOR** in integrated county welfare program, Dane County Civil Service, Madison, Wisconsin. Master's degree social work plus 2 years' experience, preferably some experience in supervision. Challenging opportunity for developing new program. Psychiatric consultation available. Annual salary \$5316-\$6036. County participates in Wisconsin retirement and Social Security. Blue Cross-Blue Shield and catastrophe insurance available. Applications are available, are to be filed in office of Dane County Clerk, Otto Festge, on or before March 21, 1958. For further information write to Allen Zoeller, Director, Dane County Public Assistance Department, Courthouse, Madison, Wisc.

**SUPERVISOR**, well qualified, experienced. Salary range \$5400-\$6600. Social work staff of 30. Expanding program (adoption, unmarried mother work and foster care); active staff development program; generous resources for psychiatric consultation; excellent personnel practices. Write: The Rev. Joseph P. Springob, Director, Catholic Social Welfare Bureau, 2018 N. Oakland Ave., Milwaukee 2, Wisc.

**FEMALE CASEWORKER**, Master's degree, to carry small case load in private, nonsectarian children's agency. Progressive personnel practices; good supervision; psychiatric consultation; excellent working conditions. Salary open. State needs. Partial maintenance and generous car allowance. Write Executive Director, Taylor Children's Home, 3211 Taylor Ave., Racine, Wisc.

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